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THE AGING WORKFORCE

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34TH INSTITUTE ON REHABILITATION ISSUES

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Foreword

The Aging Workforce: A Perfect Opportunity

On February 18, 2008, a 71 year old female was transported by ambulance to a regional hospital with what she thought were complications of pneumonia and a bad case of the flu. A few days after admission, she discovered that she was ailing from congestive heart failure. As a result of the heart failure, she suffered a massive heart attack, went into cardiac arrest and had to be resuscitated. She was transferred to a cardiovascular specialty hospital more than an hour away where she underwent surgery to have an aortic valve replacement, a mitral valve repair and a quintuple bypass. She suffered some post surgical complications, such as pulmonary edema, and went into respiratory arrest twice. She struggled with breathing and had to be placed on a ventilator because her lungs were not functioning properly. Eventually, after two months of hospitalization, she improved enough to be transferred to a cardiac rehabilitation center. There, she had to undergo physical and occupational therapy to walk again and improve her fine and other gross motor skills.

Virginia is a retiree from a local school system, where she worked with disabled students for more than thirty years. Prior to the hospitalization, she was an active volunteer member of the local medical auxiliary transport, an avid gardener, a school bus driver and an active “Granny” of ten. She has worked as long as she can remember and enjoys getting up in the morning for a purpose.

One morning after being discharged home from the cardiac rehabilitation center, Virginia sat on her back porch enjoying the melodic sounds of spring. Moments later her long term substitute bus driver pulled off with

the bus that she had driven for years. With her eyes, she trailed the bus out of the driveway and sight. She immediately turned and said emphatically, "I may have a few medical issues but I have to get back to work."

I know this lady pretty well because she is my Momma. Momma is one of thousands who are aged and living with a disability. She wants to re-enter the workforce because she wants to remain active. Also, all of her children are grown and she enjoys the social interaction at work. According to her, "Work fills that lonely void that children leave behind." She believes that "work defines who a person is and where they are going." Since her illness, she has been suffering from bouts of despair, which is common amongst patients who have undergone open heart surgery. Despite her emotional roller coaster rides, she is adamant about returning to work. Both the cardiovascular surgeon and the cardiologist attributed her recovery to an active and meaningful lifestyle prior to her illness. She was referred to a state vocational rehabilitation agency for an intake appointment. When she arrives at this appointment, the vocational rehabilitation counselor will meet a very learned individual with years of broad experience, but also an older person who is now living with a disability.

The above narrative was shared by one of the Primary Study Group members of the 34th Institute on Rehabilitation Issues (IRI) at the National IRI Forum. The story was so effective at capturing the attention of the audience that we asked to include it in the document. One reason the story was so effective is that it speaks to the fact that, not only are we all growing older ourselves, but we all know people—friends, relatives, co-workers, mentors—who have experienced the physical, psychological and social effects of aging. We know that the stereotypes of older workers as mentally and physically slow and feeble do not apply to these individuals, that they are vital and still have much to contribute, and this realization helps us to understand some of the barriers older workers face.

Defining the Aging Workforce

Who, then, comprises the aging workforce referred to throughout this document? Although age 65 is most often used in policy discussions to differentiate "old," the use of chronological age is only one way to define age cohorts. In addition to the chronological definition of old age, there are biological, psychological, social, and functional definitions of age that may serve as a criterion for the upper age limit of employability. The definition of the upper age limits for inclusion in employment should relate to employment and not to a chronological age milestone (Wadsworth, Smith & Kampfe, 2006). Rehabilitation professionals may consider the following definitions of age as equally valid as chronological

age in operationally defining the criteria for participants in employment programs.

Chronological age is the number of years that have elapsed since a person's birth. This age is often used in legislation, research, and other reports because it has been the traditional method of defining age and because it is measurable, linearly.

Biological age is an estimate of biological health. It is assessed by determining the individual's biological position with respect to his or her position in the lifespan. An individual's biological age may differ from those of other persons of the same chronological age due to disability, lifestyle, or heredity. For example, persons with Down's syndrome can experience biological premature aging, and a person with Down's syndrome may be considered old at age 40.

Psychological age is an estimate of adaptive capacities. Psychological age is assessed by determining the individual's ability to use learning, memory, intelligence, motivational strengths, coping strategies, personality, and interests to adapt to environmental challenges. Persons less able to adapt are considered to be psychologically old. For example, individuals with chronic alcohol abuse may be psychologically old at a younger chronological age than persons who do not abuse alcohol because abuse is associated with premature psychological aging characterized by diminished cognitive flexibility.

Social age refers to the age-related social roles and sets of expectations that persons have for themselves and impose on others. Social age may be associated with vocational roles independent of chronological age. For example, military personnel may enter the social role of retiree after 20 years of service regardless of chronological age, whereas rehabilitation counseling educators are generally eligible for benefits at a set chronological age (i.e. 65 or 67) regardless of longevity of service.

Functional age is an estimate of the chronological age at which the person can no longer perform expected life tasks. Functional old age may be measured by age-related physical changes such as diminished stamina. Functional age may also be determined by one's time within an occupation. For example, a professional contact-sport athlete may be considered old at chronological age 40 and an airline pilot old at age 60. On the other hand, an athletic coach and an airline executive may be considered old at much later chronological ages.

Although there are several definitions of aging and old age, for the

purposes of clarity, the authors of this document use chronological age to describe trends in aging and employment. Chronological age is used in order to be consistent with prior literature, current policy, and practiced regulations; and because most professionals are familiar with the concept of chronological age as a method of delimiting employment service cohorts. The authors define the aging workforce as those workers 55 and older. This chronological age was chosen because this is the age at which the AARP, one of the collaborators contributing to this document, considers workers as members of the aging workforce. However, the authors were also acutely aware that workers who are aging with a disability may experience biological and functional aging at an earlier chronological age and urge vocational rehabilitation (VR) professionals to consider these other definitions when working with potential customers. The reader should also note that there are some data presented on workers age 40+ because this is the age at which workers are protected by the Age Discrimination in Employment Act.

In addition to defining the aging workforce, the Primary Study Group also had many lively discussions about the terminology that should be used to refer to members of this group. Some members believed strongly that to avoid using the words “old” and “older” perpetuated the stigma associated with these words and the stereotypes we were trying to expose. Other members believed strongly that words such as “mature” and “maturing” carried connotations not only of chronological age but of experience, stability, institutional knowledge, and advanced social skills—all desirable qualities which older workers can bring to the workplace. In the end, the Primary Study Group decided to use a variety of terms. While “mature workers” is the term used most frequently, readers will also note references to “older workers.”

Workplace Demographics

The changing demographics of the workplace will have a significant effect on the way employers recruit and retain workers. As the population ages and leaves their employers—and potentially the workforce altogether—valuable skills and knowledge will leave with them. Many will be leaving to “do something different.” Others will leave for reasons including care giving responsibilities - possibly for their children and parents, simultaneously. At the same time, many in the Baby Boomer generation and in the generation preceding will be forced to stay in the workplace

place longer because of financial and health insurance reasons. However, there are other motivations for wanting to work longer, including staying engaged, wanting to try something new, and the social aspects of being at work.

Visible examples of this demographic shift may be already apparent in the Vocational Rehabilitation System as federal, state, and local government organizations are also vulnerable to the pending retirements of the aging population, leaving organizations scrambling to find scarce talent to fill current and future job openings.

The implications of this demographic shift are many, because it is going to have an enormous effect on the Vocational Rehabilitation system, bringing more and more clients that are age 50+ into the system, with varying disabilities. This is a perfect opportunity for VR to reposition itself in the eyes of employers as a strategic staffing resource and partner. The VR system can actually increase its placement rates, not only of clients age 55+ but also of all persons with disabilities, by demonstrating that people with disabilities have the skill-set and work ethic that employers are seeking.

The Opportunity for Vocational Rehabilitation

The Vocational Rehabilitation system has a long standing relationship with the business community. This relationship is essential when serving VR clients. Also, VR Counselors possess the skills necessary to serve clients with varying abilities. Therefore, this shift in client demographics should not burden our VR system but rather enhance it. These changes will benefit clients, employers, and employees of the VR system. However, this new approach will need to be fine tuned in order to effectively engage the employer community, clients age 55+, and capitalize on the skills VR Counselors already possess. The implications of an aging workforce create an excellent opportunity for the VR system in:

- meeting the employer demand for skills,
- increasing placement rates,
- developing deeper relationships with employers,
- expanding VR counselors skill sets, and
- preparing the VR system for the Boomer and future generations

As a result, this publication was written with all employees of the VR system in mind, from VR Counselors to regional directors. It is designed as an information source on the changing demographics of the workplace and the implications for jobseekers with disabilities age 55+, as well as a “how-to” reference guide with models that can be replicated in VR offices across the country.

What you will learn

Chapter One provides a significant amount of research findings as background information and supporting evidence of the impact of the aging workforce on the VR system. The focus is on jobseekers age 55+ in general and those with disabilities in particular. Readers will also learn about the changing demographics of the workplace and how these are going to impact the VR system. In addition, readers will learn about what motivates workers age 50+ to continue to work and the barriers that can prevent them from doing so. Chapter Two makes the argument for why the State-Federal VR system is best equipped to meet the needs of older workers. Chapter Three focuses on the employer’s perspective and employer models of best practices for recruiting and retaining workers age 55+. This chapter describes the changing needs of employers and provides an overview of talent management and how employers are becoming more strategic in their recruitment and retention practices. Chapter Four provides those working directly with disabled clients age 55+ “how-to” tips that can be immediately implemented in their organizations and describes how they can build on the many skills they already have. Chapter Five provides recommendations to VR professionals, policy-makers and employers on how to better serve the aging workforce.

Take-Away Recommendations at a Glance

1. Rehabilitation Professionals must consistently self-evaluate and then challenge and correct their own assumptions about aging and about the potential contributions of mature workers.
2. Rehabilitation processes and approaches must be adapted to meet the diverse needs of mature and maturing workers.
3. Rehabilitation interventions must be timely, since interventions are most effective before maturing workers decide to leave the job.
4. Work return services and supports must be provided to reflect the needs and desires of mature and maturing workers.

5. Service provision should incorporate a career development perspective that focuses on optimizing flexibility and later life work options.
6. Rehabilitation professionals must expand services considered and focus on health and independent living needs due to the complexity and inter-relatedness of health, work and life demands in later life.
7. To enhance later life options for all persons served by VR, rehabilitation professionals should ensure that by the time VR files are closed the consumer is fully aware of available similar benefits and services, post-employment processes and services, health maintenance strategies, retirement planning and the availability of the VR professional as a consultant to workers with disability and employers.
8. Rehabilitation management must make efforts to value, retain and support maturing VR staff so consumers profit from the life experience and years of service expertise of those staff.
9. Management must act to encourage service provision to mature and maturing workers with disabilities.
10. Managers must also work with staff to identify related training needs, process or procedure barriers and system or service enhancements.
11. Staff at all levels of VR and RSA must act to build partnerships so better outcomes are promoted for mature and maturing workers with disabilities.
12. VR Policy makers must adapt program measures consistent with mature worker informed choice that often includes goals of self-employment, part time and part year work.
13. Policies and procedures must be reviewed to ensure ease and timely service access for maturing workers with disabilities.
14. VR must establish relevance with the mature worker who does not see themselves as “disabled.”
15. VR must embrace the spirit of the Rehabilitation Act of 1973 by becoming a model employer in providing support and resources for internal staff who are maturing with and into disabilities.
16. Pre-service and in-service VR staff training must include adequate orientation to aging with disability, needs and potential of mature workers, effective strategies to enhance outcomes and work options in later life, as well as employer focused techniques and tools for use when serving mature workers.

17. Pre-service and in-service training must include rehabilitation professional examination of personal attitudes and bias related to aging as well as the contributions, strengths and preferences of mature workers.
18. Rehabilitation professional educational preparation must include information on the Age Discrimination in Employment Act (ADEA) as well as other relevant national and state laws that affect employment.
19. Research must be adapted to better track outcomes and evidenced based practices that lead to employment success for mature and maturing workers.
20. Data must be collected to tap the range of benefits from enhanced VR services to mature or maturing workers.
21. Data should be gathered that better distinguishes the VR experiences and outcomes for the diverse populations of maturing workers.
22. Research result utilization and application will be facilitated through research that uses consistent definitions of the most VR relevant populations.
23. Research should be conducted to collect and disseminate information about emergent innovative practices within states as more mature and maturing workers are served.

How to use this document

This document is intended for professionals at all levels of the State-Federal VR system: VR counselors, middle managers, administrators, and the Rehabilitation Services Administration. It can be read as a whole, or readers can go to specific chapters that address their particular situation or need. It is the hope of this Primary Study Group that readers will review the entire document and internalize the ideas and concepts presented. One way to approach this is to study the review questions at the end of each chapter. If they so desire, readers can then take an online test at <http://www.rcep6.org/iri/tmp/study.htm> for Certified Rehabilitation Counselor continuing education credit. Whether or not readers take the self-study course and test, it is our hope that they will use what they learn from this document to take the lead where they are in their organizations to make a difference for mature workers.

Authors Note

When this document was written, the economic outlook was brighter than it is now in 2010. The workforce is still aging, however, and many of those in the workforce who might have opted for retirement now find themselves with deflated retirement accounts and fewer options. Many older workers will remain in the workforce, not by choice but in order to survive. The Primary Study Group believes that the observations, strategies and recommendations presented in the following pages are perhaps more relevant now than they were when the document was being developed. It is our hope that readers will reach the same conclusion.

Chapter One

Setting the Stage – The Impending Storm of Opportunity

General Demographics

You need to know that:

The older population is one of the fastest growing age groups in the United States.

There are many definitions of “age” and “old”.

Older people are living longer and are healthier than in the past.

The older population is a widely diverse group.

A large percent of older people have one or more disabling conditions.

Baby Boomers will soon begin to reach traditional retirement age.

Many older persons either want to or need to work beyond traditional retirement age.

The large increase in the number of older people will result in the aging of the workforce.

As Baby Boomers age and retire, there will be a significant shortage of employees.

Older workers bring many strengths to the workforce.

Older workers desire certain working conditions, especially those offering flexibility.

Employers will need to recruit and maintain older workers.

Employers will need to offer conditions that meet the needs of older workers.

Introduction

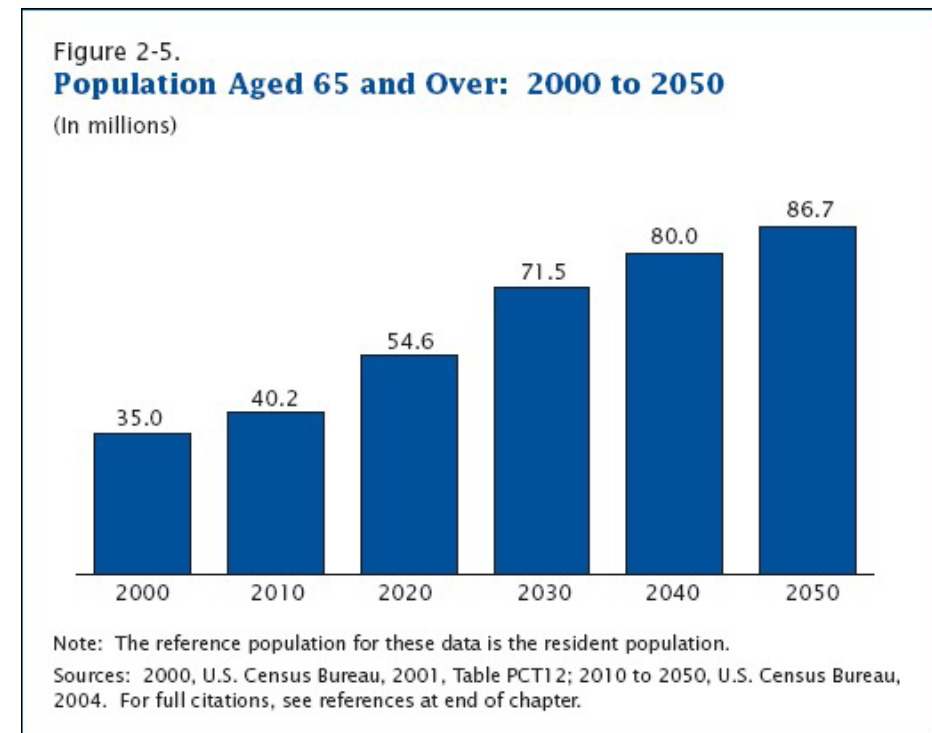
Historically, the American workforce of the 18th and 19th centuries consisted primarily of employees in their 20s, 30s, 40s, and 50s. The current trends in the aging of the North American workforce can be seen as an opportunity, a challenge, or both to the Rehabilitation Services Administration (RSA) and subsequently to Vocational Rehabilitation (VR) service agencies. The challenge before RSA and the VR system is to provide services and manage resources in order to serve the growing number of workers age 55 and older with disabilities that are willing and have a desire or a need to work. In addition to managing resources, VR can assist the growing number of employers who face severe labor shortages due to the aging workforce.

The opportunity to provide employment services to the Baby Boom generation, the most politically influential age group in the United States, is the opportunity to increase the social, political, and economic impact of the vocational rehabilitation program. The purpose of this chapter is to provide a brief overview of the characteristics of older workers who are likely to seek employment services due to a disabling medical condition, as well as to define challenges and opportunities the aging workforce presents to VR. The chapter begins with a description of the aging workforce and trends in the labor force as it relates to adults 55 and older. Included in the discussion is a description of the disability characteristics of older persons with a focus on older persons who seek employment. The chapter concludes with a discussion of the employment benefits of mature workers in today's workforce.

The Growth of the Older Population

The older population is one of the fastest growing age cohorts in the United States (Dixon, Richard, & Rollins, 2003; Fernia, Zarit, & Johansson, 2001). The 2000 census reported that there were 42 million individuals between the ages of 50 through 64, and the number of individuals aged 65 and older was approximately 35 million (U.S. Census Bureau, 2000). As these two groups age, the number of older persons age 65 and older is projected to increase to 71 million by 2030, and to 80 million by 2040. Figure 1a illustrates the projected growth in the population age 65 and older between the years 2000 and 2050.

Figure 1a population age 65 and older: 2000-2050



The current older adult population was born before 1946 and encompasses several generations: 1) the silent generation, born between World War I and World War II; 2) the “greatest” generation defended the United States in World War II as soldiers or provided support while employed in the United States during the war; and 3) the lost generation, born between World War I and the Great Depression. Estimates of the size

of this cohort range from 34 million (U.S. Census, 2000) to more than 37.3 million individuals (Administration on Aging, 2007) and includes a large percentage of females (Newman & Brach, 2001; Smith & Kampfe, 2000). The female/male ratio is approximately 138 women to 100 men, and this ratio increases with age. For example, the ratio among people age 65 through 69 is 114 females to 100 males, whereas the ratio among those age 85 or older is 213 females to 100 males (Administration on Aging, 2007).

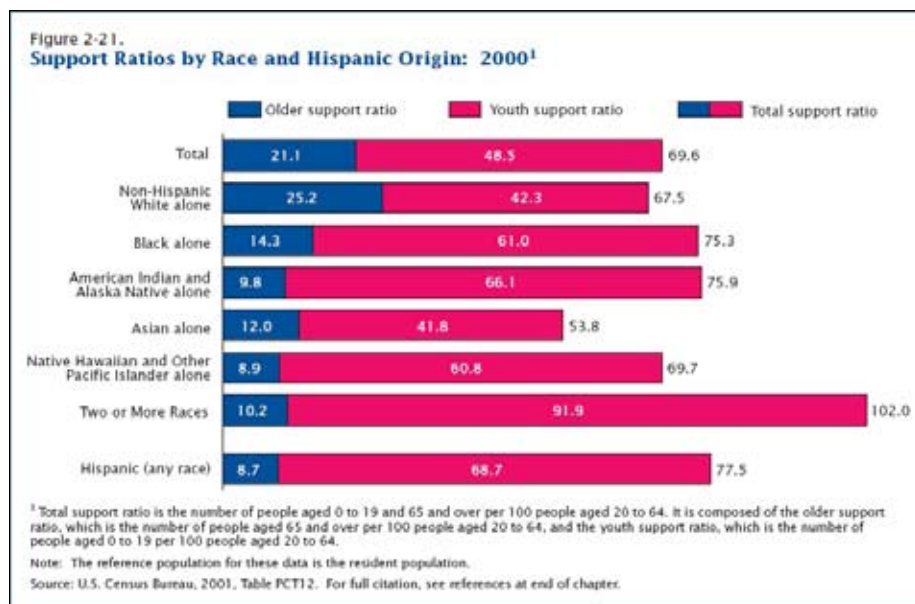
In 2006, 23.3% of this older population reported an income of less than \$10,000 per year and only 32.5% reported incomes of \$25,000 or more. About 7.9% of family households of persons age 65 or older had incomes of less than \$15,000 and about 53.2% of such households had incomes of \$35,000 or more. The median income for males in this group was \$23,500 and for females \$15,000. In 2005, major sources of income included Social Security (89% of population), assets income (55% of population), private pensions (29% of population), and government employee pensions (14% of the population). Twenty-eight percent of this group reported receiving earnings as a source of income (Administration on Aging, 2007).

As a result of the increase in life expectancy, the current and projected numbers of older adults is expected to continue to increase. For example, from 1900 to 1960, life expectancy increased by 2.5 years; and from 1960 to 2004, it increased another 4.3 years (Administration on Aging, 2007). It is projected that individuals who reach age 65 today are expected to live an additional 18 years, and those who reach age 85 are expected to live an additional 6 to 7 years (Federal Interagency Forum of Aging-Related Statistics, 2006). This increase in life expectancy can be attributed to the availability of better health conditions and medical care than in the past centuries (Kampfe, Wadsworth, Mamboleo, & Schonbrun, 2008). Increased health among older individuals has given way to viewing this age cohort as a more productive and resourceful population (Meyers & Degges-White, 2007) than perceived in the past. Terms such as successful aging, resourceful aging, healthy aging, and positive aging are now being used rather than terms associated with decline (Angus & Reeve, 2006). In addition to increased health and increased life expectancy, the older population will expand due to the aging Baby Boom generation (i.e., persons born from 1946 through 1964) (Administration on Aging, 2007; Collins, 2003). The U.S. Census Bureau (2006) reported that in 2005,

this group consisted of 78.2 million individuals ranging from the ages of 48-60. The Baby Boomers will reach age 65 in successive waves, with the first group beginning in 2011 and subsequent groups to follow in latter decades. Quadagno (2005) and the U.S. Census Bureau (2006) project that this age group will eventually represent 20% of the population and are evenly distributed between males and females (unlike previous generations). Accordingly, in 2005, 50.8% of the Baby Boomer generation were females; and by 2030, it is estimated that 54.9% will be females (U.S. Census Bureau, 2006).

The current population of older adults is diverse and will continue to become a more widely diverse group in time (Dixon et al., 2003). For example, the fastest growing subgroup of this population is persons of minority status. In 2000, 16.4% of the older adult population was reported as having minority status. It is estimated that this percentage will increase to 20.1% by 2010 and 23.6% by 2020 (Administration on Aging, 2007). Scharlach, Fuller-Thomas and Kramer (1999) also projected that by the mid-century this subgroup is expected to grow by 500%. Figure 1b illustrates the projected changes in the ethnic diversity of the population between 2000 and 2005. As can be seen, the proportion of the population who identify themselves as from a minority background will increase.

Figure 1b: Population projection by race: 2000 -2005.



Furthermore, the large group of older individuals encompasses many age groups. The ages of older adults span from as early as age 50 to over 100 and cover various decades and generations of people. Each cohort has experienced various life events and environmental influences that are unique, and these experiences will have some influence on individuals in each cohort (Kampfe, Harley, Wadsworth, & Smith, 2007). For example, people who are age 80 or older spent much of their youth without input from television or other methods of communication that would inform them of world conditions. They will have experienced Nazism, World War II, the first atom bomb, the Roosevelt era and his Work Projects Administration (WPA) to relieve national unemployment, the big band era, and silent movies. Those who are age 60 will have been introduced to television in their youth and will have experienced (or been aware of) the first U.S. space satellite, the addition of the 49th and 50th states, civil rights rallies, anti-war demonstrations, the signing of the Civil Rights Act, the Vietnam War, the assassination of John F. Kennedy, rock and roll, drugs, and free-love. Even within age cohorts, there is diversity. Some of the differences that exist within age cohorts can involve location, such as rural versus urban, mid-west versus East and West coast; race; and culture resulting in diverse perspectives and practices.

Figure 1c: Cycles of history

Name	Birthdates	Events
Greatest Generation	1911 - 1945	World Wars
Baby Boomers	1946 - 1956	Civil Rights Movement / Korea
Generation Jones	1957 - 1974	Counterculture / Atomic Age
Generation X	1975 - 1987	Vietnam War/ Cold War/Mass Media
Generation Y/ Millennial Generation	1988 - 1999	War on Terror / Information Age
Global Generation	2000 – present	Digital Globalization

Neil & Strauss, 1991

Baby Boomers have a broad range of income levels (Collins, 2003) and savings levels (AARP, 1999); however their income levels are higher than people of this age group in the past. Median household incomes for this general age group (i.e., ages 55-64) increased from \$44,397 in 1984 to \$55,407 in 2004. In addition, in 2004, 53% of those aged 55 through 64 had some college education and only 14% had less than a high school education. Those with a college education had higher incomes than those without a high school education. Median incomes for those with a college education were reported as \$86,982, whereas those without a high school education had median incomes of \$28,403 (Administration on Aging, 2007). Because life expectancy for current older adults and Baby Boomers is higher than that of their predecessors, they may face financial difficulties in retirement. A large percentage of those who plan on retiring are predicted to not have enough retirement resources available to them (Munnell, Golub-Sass, & Webb, 2007). Furthermore, among persons who receive disability related benefits, insufficient retirement resources are common due to the limits imposed on savings by many benefit programs.

Perceptions of Retirement among Older Individuals

The use of chronological age is one way to define the age of employment before retirement, but does not accurately describe the differences among persons who are older. In addition, negative stereotypes of persons who are older are unknowingly fostered by the practice of limiting the discussion of employment and disability to an upper age limit (Quadagno, 2005). In recent years, the traditional view of retirement has changed from a total cessation from work to employment opportunities with variability as the foundation of the employment choices due to older adults' desire and need to work (Kampfe, et al., 2008).

The older population, in general, has expressed a desire to work for interpersonal and intrapersonal reasons.

- Some may perceive that they are not old enough to retire (Palmore, 1999; Wadsworth et al., 2006);
- They may have the desire to share life knowledge with others (AARP, 2003; Dendinger, Adams, & Jacobson, 2005);
- Others may work to enhance or maintain
 - personal growth and learning (AARP, 2003),
 - socialization (AARP, 2003; Bernaccio & Falvo, 2008; Dendinger et al.),
 - social support (Smyer & Pitt-Catsouphes, 2007),
 - enjoyment (AARP, 2003),
 - usefulness, productivity (Bernaccio & Falvo; Dendinger et al.),
 - life purpose or meaning (Bernaccio & Falvo; Henretta & Lee, 1996),
 - independence (Bernaccio & Falvo, 2008; Judy & D'Amico, 1997; McColl, 2002),

- structure (Bernaccio & Falvo; Dendinger et al.),
- self-esteem, self-efficacy (Dendinger et al.; Kampfe, 1994),
- physical activity, mental activity (AARP, 2002; AARP, 2003),
- or a sense of personal satisfaction and pride (Dendinger, et al.).

Many reasons for continuing to work past the traditional retirement age may have to do with the notion that leaving the workforce is equivalent to leaving a major part of the social aspect of society, and can therefore be psychologically challenging (Dendinger, et al.).

The decision to continue to remain in, exit, or re-enter the working environment may also be based on the need for financial security. For example, in a recent retirement study, the need to work for monetary purposes was listed as the primary reason for continuing to work by both pre-retirees and working retirees (AARP, 2003). Older people may need to remain in the workforce because they lack one or more of the following: eligibility or adequate social security benefits (Hoyer & Roodin, 2003; Kampfe et al., 2008; Mamboleo & Kampfe, 2007), adequate pension programs (Mamboleo & Kampfe; Smith & Kampfe, 2000), survivor benefits (Wadsworth, et al., 2006), savings (Dixon et al., 2003; Helman, Copeland, & VanDerhei, 2006), health insurance (Bernaccio & Falvo, 2008; Maples & Abney, 2006; Mamboleo & Kampfe), funds to pay for multiple and expensive prescription drugs or health care (Finch & Robinson, 2003), or funds to pay for everyday expenses (AARP, 2002, 2003; Bernaccio & Falvo, 2008). Mature workers may also remain in the workforce in order to reach the age at which they can receive retiree health benefits or payments from retirement savings plans (AARP, 2003).

Benefits

The Social Security system was originally structured to provide financial relief to individuals with disabilities and those considered to be advanced in age. The Social Security and Medicare system today may be unable to meet the financial needs of the growing numbers of older Americans in the next decades. One in 6 Americans get monthly benefits

from Social Security; Social Security is the primary source of retirement income for 20% of beneficiaries and 7 of 10 beneficiaries derive more than half of their household income from Social Security (The Pepper Institute on Aging and Public Policy, 2005). The net cash shortfall for Social Security over the next 75 years totals over 25 trillion dollars. With the deficit to begin in the year 2018, the fund is projected to be exhausted by 2042 (CATO Institute, 2003). The Trustees of the Social Security and Medicare programs note that the surplus of tax income over expenditures will decline in 2011 and turn to a deficit; furthermore, the Medicare Hospital Insurance fund is expected to be exhausted by 2019 (Social Security Administration, 2008). In order to address the deficits, there have been calls to increase the minimum retirement age to above 67 and to cut benefits to older Americans (Andrews, 2004). Should benefits be cut, low-income workers would be hardest hit (Chao, 2006). Understanding the positive and negative aspects of the various Social Security and Medicare benefits is very important because these can have significant implications for people who wish to or need to continue to work in their older years (Kampfe et al., 2008; Mamboleo & Kampfe, 2007). The complexities of these various benefits are beyond the scope of this chapter, however, information about Social Security can be found at www.socialsecurity.gov and information about Medicare can be obtained at www.medicare.gov or 1-800-633-4227.

The definition of retirement will continue to change as the first wave of Baby Boomers reach the traditional retirement age. Projections regarding continuation of work vary; however, all studies show similar trends. The majority of workers (even those with higher incomes) plan to work after reaching the traditional retirement age (AARP, 1999, 2003; Helman et al., 2006). For example, a recent study found that nearly 70% of pre-retirees foresaw working either part-time or never retiring. Almost half planned to work into their 70s or beyond (AARP, 2003). On a broader age range, 69% of people age 45 through 74 who are currently working or looking for work intend to work in some capacity during retirement (AARP, 2002); and 68% of people aged 50 through 70 who have not yet retired plan either not to retire or to work in some capacity into their retirement years (AARP, 2003).

Description of Older Workforce/Workers

Although there is some concern that a mass exodus from the workforce will occur through 2020 when most of the Baby Boomers will have reached the traditional retirement age (Yeatts, Folts, & Knapp, 2000), there is also reason to believe that many of these individuals will remain in the workforce. As indicated earlier, many Baby Boomers intend to continue working beyond the traditional chronological retirement age. Furthermore, people who have already reached the traditional retirement age intend to continue to work. Labor economists indicate that during the next five years, the percentage of workers aged 55 through 64 will increase by 48%, and the percentage of workers aged 60 years or older will increase by 40% (Horrihan, 2004).

This intention has already been demonstrated in the current workforce. The proportion of employed individuals, age 55 through 64 years, increased steadily through the mid- to late-1990s (Purcell, 2000). At the time of the 2000 census, those who were age 55 or over accounted for 22% of the job growth in the United States and represented 18 million people (U.S. Census Bureau). This is also true of the population of those aging 65 or older. In 1986, only 19.2% of people who were ages 65 through 69 years were in the workforce; whereas by 2006, 29% of people in this age group continued to work (Bureau of Labor Statistics, 2006). This trend extended to people age 70 through 74. In 1986, 10.3% of people in this age group were in the workforce, and by 2006, 17% of this group continued to work (Bureau of Labor Statistics, 2006).

The growing number of older people, in concert with the trend to continue working at older chronological ages, is resulting in a shift in the workforce to include more older employees than in the past. For example, in 2000, 13% of the workforce was age 55 or older, with a projected increase in this percentage to 17% in 2010, and 19% in 2050 (Fullerton & Toossi, 2001; Toossi, M., 2002). This increase comes at a time when the entry level workforce is in rapid decline and the age of retirement is increasing from age 65 to age 70 (Bureau of Labor Statistics). Figure 1d illustrates that while labor force participation rates are projected to decline or remain constant in the 16-54 age group in the coming decade, the growth in the labor force will come from the increased participation of persons age 65 and older (U S Department of Labor, 2007).

Civilian labor force participation rates by age

	1996	2006	2016
16-24 years	68.6	65.5	57.1
25-54	82	83.8	83.6
55-64	54	57.9	66.7
65-74	17.5	23.6	29.5
75+	4	4.7	10.5

Researchers have found that approximately 60% of older participants continue to work after retiring from career jobs (Cahill, Giandrea, & Quinn, 2006); and that approximately one-third of working people who are age 51 change occupations after this age (Johnson & Kawachi, 2007). Workers who have moved from full time jobs to self-employment range from 25% to 28% (Johnson & Kawachi, 2007). Many older workers, especially men, are self-employed (Johnson & Kawachi, 2007). Self employment for men increases with age (i.e., 29% at ages 62 through 64; 45% at ages 70-74). Women, on the other hand, have lower self-employment rates than men have (The Urban Institute, 2006).

Older workers may also be likely to be employed in higher level positions. For example, at the 2000 census, 33% of people who were actively working at age 55 or older were managers or professionals (U.S. Census Bureau, 2000). On the other hand, Johnson and Kawachi (2007) reported that many older workers who had switched jobs earned lower wages and were less likely to have pension and health insurance coverage than they had in their previous jobs.

Part-year or part-time employment is common among older workers. Approximately 42% of working men at ages 65 through 69, and 62% of working men age 70 through 74 have part-time jobs. Approximately 59% of working women ages 65 through 69, and 73% of working women ages 70 through 74 work part time. Furthermore, from 43% to 56% of the people who have left long-term career jobs have moved into part-time employment (Johnson & Kawachi, 2007).

Traditional retirement that involves a change from full-time work to cessation of work is no longer the norm. A more current norm is “bridge employment” or “phased retirement.” Bridge employment is defined as employment that occurs after retirement but before withdrawing from

the workforce entirely (Quinn, 1999). Two types of people are typically involved in bridge employment: those who do not need to work for financial purposes and those who can not afford to retire (Quinn, 1999). Phased retirement may include full-time or part-time work, flexible work hours, planned absences, or self-employment.

Strengths of Mature Workers

Mature workers bring a host of strengths and a lifetime of developed skills to the workplace. Some of the most obvious strengths of older workers are their experience, knowledge, expertise, and skills (Avolio, Waldman, & McDaniel, 1994; Burlew, 2006; Buryère, Harley, Kampfe & Wadsworth, in press; Duncan, 2003; Pitt-Catsouphe, Smyer, Matz-Costa, & Kane, 2007; Rix, 2001). Furthermore, they tend to have characteristics such as optimism, resilience, autonomy, adaptability, positive self-esteem, willingness to be involved in relationships and projects (Borman & Henderson, 2001; Mahoney & Restak, 1999), maturity (Finch & Robinson, 2003; Rix, 2001), reliability, dependability (Pitt-Catsouphe et al., 2007; Schwinn, 2007), loyalty (Pitt-Catsouphe et al., 2007), productivity (Munnell, Sass, & Soto (2006), good judgment (Rix, 2001), understanding of work ethics (Finch & Robinson, 2003; Pitt-Catsouphe et al., 2007), willingness to work varied schedules (Pitt-Catsouphe et al., 2007), ability to work independently (Finch & Robinson, 2003), and are interested in or have the ability to mentor or supervise younger workers (Finch & Robinson; Pitt-Catsouphe et al., 2007).

Older people’s work performance has been reported to be superior to those who are younger (Smith, 1990; Warr, 1994). Their productivity is high (Pitt-Catshouphe et al., 2007) and they may have institutional memory that can be valuable to an employer (Bruyère et al., in press). They also are less likely to sustain disabling on-the-job injuries (Human Capital Initiative, 1993; Salthouse & Maurer, 1996), they are more likely to remain with their employer (Pitt-Catsouphe et al., 2007; Strebler, 2006), and more likely to have built more networks with clients and colleagues than their younger counterparts (Pitt-Catsouphe et al., 2007). Because of these qualities, human resource personnel have indicated that they view

this population as valuable, both as new hires and as ongoing employees (Pitt-Catsouphes et al., 2007; Rix, 2001).

Working Conditions Desired by Mature Workers

Mature workers often have multiple responsibilities in addition to work. Many have aging parents or family members who require assistance with medical appointments or assisted living. Furthermore, an increasing number of older people are grandparents raising grandchildren (Quadagno, 2005; U. S. Census Bureau, 2000). They may also have their own medical conditions that require considerable amount of time or rest to accommodate these responsibilities (Schonbrun & Kampfe, in press). In addition to these time-consuming situations or circumstances, some mature workers may desire to spend more time with their families, to engage in leisure activities that they have looked forward to in retirement, to relax and have fun, and to do things that they previously had not had time for (AARP 2003).

For these and other reasons, mature workers tend to desire a flexible work schedule. They want employment situations in which they can remain employed as long as they wish, take time off to care for family members (i.e., spouse, parent, grandchild), set their own working hours, and achieve a balance between their personal lives and work (AARP, 2003). Accordingly, mature workers may desire part-year or part-time work (AARP, 2003; Rix, 2001). Examples of flexible work practices include decreasing the number of hours worked, adjusting starting and quitting times of the day, working only a few months of the year, using telecommuting or other electronic methods to conduct business, working for the same employer at different worksites in the winter and the summer, cycling in and out of a job, changing the intensity or scope of a job, or working as a consultant (Center on Aging and Work/Workplace Flexibility, 2005; Pitt-Catsouphes, 2007).

Mature workers have expressed a desire to work in a worker-friendly environment, to have opportunities to learn new things, to work in a situation in which employees' opinions are valued, and to work at

something they have always wanted to do. Furthermore, they want to work in a situation that offers health benefits and pension plans for their future retirement from work (AARP, 2003). Others prefer self-employment (AARP, 2003; Center on Aging and Work/Workplace Flexibility, 2005; Pitt-Catsouphes, 2007). These conditions will allow the mature worker to stay engaged and to benefit from participating in work while enjoying other activities that may be required or that can add to the quality of life.

Aging & Disability

The expansion of the older adult population brings with it some unique characteristics that have not been previously accounted for historically. This age cohort of individuals 65 and older are recorded as having the highest number of disabled persons with a relatively larger percentage of those with a disability being female or minority. According to U.S. Census (2002) disability data, 52% of the U.S. population age 65 and older is disabled as compared with only 12% of the total population (Steinmetz, 2004, Figure 2). Among the entire U.S. population, 12.5% have disabilities, but 38% of these people are age 65 years or older (U. S. Bureau of the Census, 2000).

Disability is measured by different sources in a variety of ways (Schoeni, Freedman, & Martin, 2008). Trends in disability prevalence are difficult to determine, in part because different researchers have used different criteria to define disability and different methodologies to identify morbidity trends (Freedman, Martin, & Schoeni, 2002). When discussing older adults with disabilities, it can often be found that definitions are related to activities of daily living and instrumental activities of daily living (Schoeni, Freedman, & Martin, 2008). Projections by the Census Bureau indicate that the disabled population, age 65 years or older, will double from 10 million in 2000 to 21 million in 2040 (AARP, 2007). Approximately 75% of the older population has a medical condition that is disabling (Calkins, Bult, Wagner, & Pacala, 1999). It has also been reported that 54.5% of older individuals have at least one disability and that 37.7% have a disability that is considered to be severe (Administration on Aging, 2004). Although many older people are likely to have one or more conditions associated with disability, these conditions do not prevent them from working (Kampfe, Harley et al.,

2007; Kampfe, Wadsworth, Mamboleo, & Schonbrun, 2008; Kampfe, Wadsworth et al., 2005).

The most common acquired disabling conditions of people who are age 65 or older are arthritis (47% to 50%), hypertension (48% to 52%), heart disease (29% to 32%), cancer (20% to 21%), and diabetes (16% to 17%) (Centers for Disease Control and Prevention, 2007). In addition to the previously stated disabling conditions, a common problem among older adults is using their senses to make accurate observations. A 1995 report indicated that vision impairment (i.e., difficulty seeing even when wearing glasses) affected approximately 14% of people from ages 70 through 74, and 32% of people who were age 85 years or older. The incidence of blindness in both eyes was reported to be 1% for people aging 70 through 74 years and 2.4% of people who were age 85 years or older (Centers for Disease Control and Prevention). Cavanaugh and Blanchard-Fields (2006) reported that hearing loss (i.e., trouble hearing or deaf in one or both ears) was experienced by approximately 25% of people aging 70 through 74, and by approximately 50% of people who were age 85 or older. Deafness was experienced by approximately 5% of those aging 70 through 74 years and 17% of those aging 85 years or older. Mental health disorders are also experienced by 15% to 20% of the people who are over age 65 (U. S. Congress, et al., 1991). One particular disability that is expected to significantly increase is substance abuse among persons age 50 and older, from approximately 719,000 to 3.3 million (355% increase) between 2002 and 2020 (Colliver, Compton, Gfroerer, & Condon, 2006).

Among persons with lifelong disabling conditions, the overall improvements in health care in the developed countries have increased the life span in the general population and among persons with developmental disabilities (Hogg, Lucchino, Wang, & Janicki, 2001), traumatic brain injury (Weintraub & Ashley, 2004), amputation (Briggs, 2006), and multiple sclerosis (DeVivo, 2004). For example, although there is evidence that people with severe or profound intellectual disability, multiple disabilities (e.g. cerebral palsy, epilepsy, severe motor handicap and inborn heart defect), and persons with Down Syndrome have a reduced life expectancy as compared to nondisabled peers, mortality rates among people with mild intellectual disability and nondisabled peers in developed countries are similar partly due to similarities in health care between persons with and without disability (Hogg, Lucchino, Wang, & Janicki, 2001).

However, there is a lack of research on the interaction of chronological, biological, psychological, social, and functional aging and chronic disabilities. Patterns of aging specific to diagnostic categories have been described for relatively few disabling conditions (e.g. Down Syndrome), and such patterns are not reliable indicators of the prognosis for any given individual. The limited research available suggests that the complex interaction of the aging process and the particular disability experienced may lead to functional disability patterns that are not typical of both the aging process and the disability (e.g. TBI; Weintraub & Ashley, 2004). Individual lifestyle factors, access to health care, support networks, wellness, work history and income are likely factors that influence the manner in which any given individual with a disability ages.

Work Environment

The sections above describing older workers must be considered within the context of the changing nature of employment. The 1950s and 1960s labor market was very different from today's high pace, technology driven society. The 1950s and 1960s work environments were reflective of the times. Times were changing and traditions were challenged in many ways. Women and more minorities were entering the workforce as a result of the women's movement and civil rights movement (Yeatts et al., 2000). Baby Boomers were entering the workforce during that time with a high school diploma in hand and a fervor for working. The type of jobs they obtained included manual labor as well as white collar jobs. With the advent of personal computers, globalization, and independence, the workforce has rapidly changed. The Baby Boomers who entered the work force in the 1960s and 1970s grew as technology grew, obtaining the necessary skills to survive the technological work world of today as supervisors, managers, and laborers (The Secretary's Commission on Achieving Necessary Skills and the U.S. Department of Labor [SCANS/DOL], 1991).

By 2020, Baby Boomers who entered the workforce in the 1960s and 1970s will be exiting the workforce and heading into retirement. It is estimated that by 2020, 25 million people will be ready to exit the workforce, leaving many jobs to be filled; this mass exodus brings about a vortex in the current workforce. When Baby Boomers exit the workforce, they leave with all of their knowledge, wisdom, skills, attitudes, and experiences that they use to understand and know their

chosen profession. The knowledge and wisdom that are learned over time in a position can not be taught or incorporated into a training session for younger or less experienced workers (AARP, 2007). The SCANS/DOL (1991) report suggests that the work environment of the future will consist of “high performance workforce” where problem solving skills, working together toward one goal as a team, and flexibility are valued traits.

Employer Needs

Industry is always looking for mature, talented, and skilled workers who can perform assigned tasks, particularly in roles where delegation is used. In order to maintain a productive workforce, employers are faced with the responsibility of drawing in or maintaining talented workers. The six most significant future challenges facing all employers are 1) understanding the impending changes and challenges to the workforce; 2) preparing the next generation of diverse employees; 3) recruiting and selecting employees; 4) engaging and retaining employees; 5) providing leaders with the skills to be successful; and 6) rising health care costs (Richards & D’Amico, 1997). Additional challenges faced by employers are integrating older adults and/or disabled adults into that framework as younger workers decline and older workers retire (Seck, Finch, Mor-Barak, & Poverny, 1993). Corporations or organizations that retain more mature workers than younger workers (retail, utilities, manufacturing, and health care) may experience a dramatic shift in profit due to the loss of those who are retiring. In order to correct for this loss, businesses can consider turning to more mature workers in order to keep their competitive edge in their particular field.

Employers in all sectors will need to find new sources of employees as well as retain current employees after retirement age during the next two to five years. Organizations will need to ensure that their human resources policies are geared toward preservation of all employees (Yeatts, et al., 2000). Preservation policies tend to be more worker friendly and try to reestablish the individual-job fit for workers as changes take place. This may include training for mature workers to help them understand newer technologies, gradual training on changing processes, and management efforts to address concerns (Yeatts, et al., 2000). These conservative policies are particularly important for mature adults and those with disabilities.

Networking, recruitment, market projections and plans, and supports are strategies typically used by employers to maintain necessary employee levels

and partnerships. Vocational Rehabilitation can be a key asset for companies trying to develop more conservation policies for their workforce.

Networking/Recruitment

Employers nationwide have a new reality. Twenty-five percent of the workers ages 16-65 are projected to reach traditional retirement age by the year 2010. This will produce a significant shortage in the population of workers available in the US with no corresponding replacement workforce (Judy & D’Amico, 1997). In order to contend with the narrowing of the younger workforce and the gap left by a shortage of knowledge, wisdom, and skills when mature adults retire, agencies are retaining, hiring, or selecting mature workers. This will be of benefit to those boomers who were employed as supervisors, managers, and other professionals that choose to remain in the workforce or return to the workforce. Employers will need to find new networking and recruitment processes to search for alternatives for mature employees preparing for retirement. Although most employers are aware of the changing trends and demographics of the large number of baby boomers reaching retirement age, 82% of employers have not developed succession plans or created retention strategies for the large number of anticipated vacancies. It is critical for employers to develop networking strategies and to revise human resource policies for hiring and recruitment (Harris, 2000). Employers will need to broaden their networks and identify new pools to replace the large number of workers retiring in the near future.

Changing Job Markets

Some occupations where mature workers participate are in decline; however, there are differences of opinion regarding what types of occupations will likely absorb the vast shortfall of workers in the next decade (Government Accounting Organization [GAO], 2001). Judy and D’Amico (1997) indicate that many traditional fields will have serious declines in employment in the next 6 years. Traditional service industry (cooks, dishwashers, telephone operators, installers and linemen, railroad workers, clothing manufacturing and the apparel industry, etc.) jobs will decline significantly. A vast number of older workers in these fields may elect to retire as these careers diminish (Yeatts et al., 2000). The disappearance of many of these jobs will likely produce an exodus that will further increase the worker shortage because older

workers are often offered retirement or experience extended periods of unemployment prior to finding new positions. Additionally, older workers, once unemployed, are much less motivated to be reemployed because the formula that has motivated them in the past and led to job satisfaction has changed (GAO). The SCANS/DOL report (1991) predicts that employers who value skilled workers and promote life-long learning will be successful in the future.

A contributing factor, according to the GAO, is that the impending shortfall will be made up of professionals instead of those in less technical areas. The GAO asserts that Baby Boomers who are much more likely to have transitioned to some type of white-collar work will be those entering retirement and creating a shortage of qualified people to fill white-collar positions (Rix, 2002). The Baby Boom generation, the best educated in history, may again be unpredictable and may be motivated to remain employed by their life long achievement and recognition for their work accomplishments or the work itself. These aspects of this generation may facilitate retention of highly qualified workers in the force because there are more opportunities for those with education (Brown-Bryant, 2005).

Occupational Shifts

Although many mature adults may elect retirement from life long careers, other professions that provide job satisfaction through the work itself and the perceived level of responsibility may motivate them to transition to a second career or reenter the workforce after retirement, as indicated earlier. Prospects in professional areas that will expand and provide beneficial opportunities for mature adults to return to the workforce include the health care profession, information technology, and general services areas. These may be particularly attractive to mature adults looking for a new career that provides opportunities that complement existing levels of expertise. Additionally, these types of opportunities will be peripheral to leadership positions providing a comfortable level at which mature workers can contribute to the organization without having to dictate policies and actions. In this case, the lack of responsibility or reduced responsibility may motivate older people (Brown-Bryant, 2006)

Employment in the health care industry, in particular, will continue to explode as the population ages. Health care will provide many opportunities for mature adults looking for employment after retirement and can capitalize on their life-long experience with limited additional training. In this sense, these types of professions can be considered recognition of a mature workers experience. The recognition of experience may be especially motivating when considering positions where workers must work independently without the benefit of direction from coworkers or without close supervision. Mature adults are particularly well suited for this type of work with their life experience and common sense to deal with many issues (Piktialis, & Morgan, 2003; Sterns & Miklos, 1995).

Changing Business Processes

Aside from declining employment opportunities in certain job areas, there are the changes that occur as industries change from a primarily industrial basis to an information technology basis. Changing business processes are those that occur because of changes in the methods of conducting business (Richards & D'Amico, 1997; Yeatts, et al., 2000). These changes may reduce job satisfaction and increase discomfort for many mature adults. As the level of dissatisfaction increases, mature adults may elect retirement and not desire to return to the workplace. The increasing use of teams to conduct business and increased use of information technology are functions that may promote a retirement decision (Yeatts, et al., 2000). However, vocational rehabilitation can address the retraining of mature adults whose health precludes continuation in their current positions.

One of the biggest changes in business processes and an important contributor to rising levels of job dissatisfaction in the past decade is the extensive use of information technology. Computerized systems and interfaces change the individual's work perspective by changing the person-job fit (Yeatts, et al., 2000). In particular, the effect of the Internet and electronic mail change the essence of business communication. The level of trust placed in a particular relationship between coworkers or partners changes. Extensive use of the Internet in today's work environment reduces the level of trust (Arris, Nykodym, & Cole-Laramore, 2002). Mature adults may become dissatisfied with these changes because basic interpersonal problems are greatly amplified when electronic communication is used in place of face-to-face meetings (Brown-Bryant, 2005).

Summary

In this chapter we have discussed how the world of work and older workers are changing. These shifts have implications for the VR system. In the next chapter, readers will learn why VR is a good match for meeting the needs of a new generation of retirees and their potential employers.

Self Study Questions—Chapter 1

1. Members of the “baby boom” generation (persons born from 1946 to 1964) will eventually comprise what percentage of the population in the U.S.?
 - a. 10%
 - b. 20%
 - c. 30%
 - d. 50%
2. A difference between the population of persons age 65 and older in the year 2009 and the population of persons age 65 and older in the year 2020 will be:
 - a. The population over age 65 in 2009 is comprised of a large percentage of females and the population in 2020 will have an about equal number of males and females.
 - b. The population over age 65 in 2009 is comprised of a large percentage of healthy individuals and the population in 2020 will have a higher percentage of persons with multiple severe health issues.
 - c. The population over age 65 in 2009 is comprised of a large percentage of individuals with inadequate pensions and the population in 2020 will predominantly have fully funded retirement plans.
 - d. The population over age 65 in 2009 is overall poorer than people of this age group in the past and the population in 2020 will be overall wealthier than today.

3. The primary reason persons who are older will be needed in the labor force is:
 - a. There will be a smaller proportion of younger people in the workforce in the year 2025
 - b. The number of younger people who have completed high school will significantly decrease by the year 2025.
 - c. Most mature workers have irreplaceable job skills that younger persons have difficulty acquiring
 - d. Younger workers will not apply for jobs that are perceived to be for “old people”
4. Mature workers seeking work often desire:
 - a. Maximum pay and retirement benefits
 - b. Flexible work schedules
 - c. Full time employment
 - d. Blue collar jobs
5. A key reason that employers are recruiting older workers is:
 - a. There are fewer younger workers in the population
 - b. Older workers are unlikely to join unions or labor organizations
 - c. There are fewer younger workers who will take physically demanding jobs
 - d. Older workers rarely stay on the job long enough to collect longevity bonuses

Resource List

US Department of Education
 400 Maryland Avenue, SW
 Washington, DC 20202
 Phone: 800-872-5327
 TTY: 800-437-0833
 Web: www.ed.gov

US Census Bureau
 4600 Silver Hill Road
 Washington, DC 20233
 Phone: 301-763-4636
 Alt Phone: 800-923-8282
 Web: www.census.gov

US Department of Veteran Affairs
 810 Vermont Avenue, NW
 Washington, DC 20420
 Phone: 800-827-1000
 TDD: 800-829-4833
 Web: www.va.gov

Administration on Aging (AOA)
 200 Independence Avenue, SW
 Washington, DC 20201
 Phone: 202-619-0724
 Fax: 202-357-35555
 Relay: 800-877-8339
 Web: www.aoa.gov

American Association of Retired People (AARP)
 601 E. Street, NW
 Washington, DC 20049
 Phone: 888-687-2277
 Web: www.aarp.org

Center on Aging and Work
 Work Place Flexibility
 140 Commonwealth Ave.
 Chestnut Hill, MA 02467
 Phone: 617-552-9195
 Fax: 617-552-9202
 E-mail: age.work@bc.edu
 Web: agingandwork.bc.edu

US Department of Labor (DOL)
 Frances Perkins building
 200 Constitution Avenue, NW
 Washington, DC 20210
 Phone: 877-872-5627
 TTY: 877-889-5627
 Fax: 202-693-7888
 Web: www.doleta.gov

Government Accountability Office (GAO)
 441 G Street, NW
 Washington, DC 20548
 Phone: 202-512-6000
 E-mail: contact@gao.gov

Social Security Administration
 Office of Public Inquiries
 Windsor Park Building
 6401 Security Boulevard
 Baltimore, MD 21235
 Phone: 800-772-1213
 TTY: 800-325-0778
 Web: www.ssa.gov

World Health Organization (WHO)
www.who.int/en/

Chapter Two

State-Federal VR and Mature Workers: A Perfect Match

You need to know that:

Vocational Rehabilitation (VR) is a perfect match for the needs of older workers with disabilities.

The upper age limit was lifted from the Rehabilitation Act in 1973.

Older workers face devaluation with regard to work.

VR counselors are a powerful resource for creating positive outcomes for older workers.

VR counselors have the skills, knowledge, and philosophy to serve older workers with disabilities.

VR counselors can benefit by assisting older workers who have skills and knowledge and who wish to work.

The state-federal VR system, service providers, and vocational rehabilitation counselors (VRCs) have primary responsibility to meet the needs of persons with disabilities in the US (RSA, 2005). Mature persons are the largest population of persons with disabilities (Corthell, 1990).

The VR system is well-tailored to promote better work and life outcomes for mature workers as a result of the structure, philosophy, policies and practices mandated by the Rehabilitation Act and Amendments.

The foundational values in the VRC scope of practice include “Facilitation of independence, integration, and inclusion of people with disabilities in employment and the community” (Section II, CRCC, 2003). Vocational Rehabilitation Counselors (VRCs), by virtue of training and experience, possess competencies and resources that uniquely qualify them to assist aging persons and mature workers. The following discussion will include an explanation of why the VR system and VRCs are essential partners in promoting better life and work outcomes for mature workers with disabilities.

Why the Vocational Rehabilitation System?

Mature workers have always had needs that intersected with the expertise and resources available through the state federal VR system (Baumann, Anderson & Morrison, 1986; Brody & Ruff, 1986; U.S. DHHS, 1985). In fact, when the first national conference on rehabilitation and aging was convened in 1984, the Director of the National Institute of Handicapped Research, (subsequently NIDRR) observed,

I must point out that the problems of older persons as they live progressively closer to their limits, as essentially the same as those who are disabled earlier in life. Performance and opportunity are compromised, social stigma experienced, physical restoration may be required, coping and communication skills augmented, housing and transportation barriers overcome, and often the harsh economic realities of disability and aging confronted. (Fenderson, 1986, p.3)

A Focus on Work and on Independent Living

Work is an important part of later life, and more and more mature workers are choosing to remain in the workforce (Finch & Robinson, 2003). Often, the ability to maintain work requires adaptations and supports to continue daily living activities as a person ages. The VR system has the capacity to address such needs to make work involvement possible.

Work has very positive effects. A longitudinal study of people at age 70 and 77 showed that regardless of finances, education, illness & health status or functional limits/independence, workers had better health, were more able to take care of themselves in daily life activities and more survived at age 77 compared to non-workers (Hammerman-Rozenburg,

Stessman, Maaravi, & Cohen, 2006). Work may be seen as an expression of the broader concept of engagement, or involvement in productive roles. Research with 1,644 participants aged 60 and over showed fewer functional limitations and better self-reported health for people who were productive (Hinterlong, Morrow-Howell, & Rozario, 2007). Productive roles included regular and intermittent work for pay, volunteer work, caregiving and providing social support. Mature persons reported better health and function with more roles.

Mature workers with disabilities, similar to other VR consumers, want and need to work. A barrier is the historic emphasis on youth and benefit analysis used to demonstrate value within the VR system and program (Wadsworth, Smith & Kampfe, 2006). As a result, mature workers are underserved by VR (Harley, Donnell & Rainey, 2003) despite the 1973 expansion to include persons over age 65 (Wadsworth & Kampfe, 2004). Emphasis on cost benefit analysis in VR has been connected with devaluing mature persons based on anticipated years of contribution and related ageism (Hendricks, 2005). Similarly, medical practitioners and other professionals often assume that the mature person is of age to retire and so never refer to VR (Harley, Donnell & Rainey, 2003). Minimizing work and work roles for mature workers occurs in all career and employment service applications. Such devaluing is among the most harmful of all examples of work discrimination (Wadsworth, Smith & Kampfe, 2006). VR exclusion creates a service gap when maturing persons with disabilities leave work because of functional limitations, but are too young for typical retirement programs (Sheets, 2005).

VR competitive work emphasis is consistent with the reasons that 80% of mature applicants seek VR services (Wadsworth and Kampfe, 2004). Other mature VR consumers seek help with training and education, getting needed medical services or counseling. These services are well within the scope of typical VR services and mirror the reasons that other applicants use VR. VR emphasis on work and the independent living necessary to make work possible creates an ideal match to make work possible for mature and maturing workers with disabilities.

Nationwide Localized Expertise

The aging workforce is a national phenomenon and concern. Since services are available in every state and region of the United States (Sales, 2007), the state-federal VR program has the capacity to respond to the national demographic shift toward maturing workers as described throughout this document.

The VR program and staff who provide direct services adapt to unique populations, resource constraints, service delivery options and labor markets in each geographical service area (Sales, 2007). Employers in different geographical regions have different reactions to hiring persons with disabilities, such as Southern employer confidence about the work ability of persons with physical disabilities compared to Midwestern employer confidence about workers with mental disabilities (Gilbride, Stensrud, Ehlers, Evans, & Peterson, 2000). To enhance work options for seasoned workers, local employer concerns will need to be addressed.

The VR agency continuously adapts to the needs of consumers and to the evolving nature of service delivery. Rehabilitation organization flexibility and willingness to embrace new approaches has facilitated collaboration to meet diverse needs (Harley, Donnel & Rainey, 2003). An example of such flexibility at the Federal level is the focus on service delivery enhancements in Section 21 of the 1992 Rehabilitation Act Amendments to promote better access and parity in service delivery (Bauer & Growick, 2003; Larkin, Alston, Middleton & Wilson, 2003). The initiative followed consistent observations that, despite greater risk of disability and lower employment rates, persons of color, diverse cultures and languages were unserved or underserved within the system. Such flexibility will be needed to adequately serve the aging workforce since these are groups with the highest rates of disability, less access to services and education, more unemployment and poverty, all of which compromise outcomes and quality of later life (Larkin, Alston, Middleton & Wilson, 2003). Rehabilitation Services Administration has taken steps to recruit, train and employ a more culturally and linguistically diverse staff. These enhancements allow the agency to repeatedly and consistently adopt new strategies to meet emergent needs. As a result of this flexibility, the agency is well positioned to respond to the needs of maturing persons with disabilities.

Individual states also have capacity under the Act to make adaptations to meet emergent needs such as those presented by the maturing workforce. Each state must develop a plan to demonstrate how responsibilities under the Act will be carried out. Plans are federally reviewed to ensure that processes and service delivery conform with the Act (Brabham, Mandeville & Koch, 1998). This provides considerable opportunities for innovation and response to local needs. Michigan's implementation of a person-centered planning initiative that included consumer control, family, trained employment advisors, job carving and partnership with an advocacy organization is an example of innovative state efforts to better serve underserved populations and those with poorer VR and work outcomes (Hasnain, Sotnik & Gilhoni, 2003).

Local VRCs complement national and state agency efforts by adapting services within areas that have unique cultures and service constraints. Examples include VRCs in Appalachian states who collaborate with family, take services to the person, and address transportation, medical and social services access (Bauer & Growick, 2003). A broader service distinction is between urban and rural areas. Rural residents tend to be older, poorer, less educated, with more disability (Jackson & Seekins, 1992), less public transportation, school or work opportunity (Arnold, Seekins & Nelson, 1997), fewer services or resources, and greater travelling distances (Faubion, Palmer, & Andrew, 2001). VR counselors in these rural areas achieve work results by using collaborative relationships, the enhanced sense of community and willingness of people to help each other (Faubion et al.). In short, the VR system and counselors within it make proactive efforts to adapt to unique community assets and strengths as advocated by Allen and Seekins (1994). This uniquely positions the agency to respond to the needs presented by a nationwide aging workforce.

Expertise of staff is promoted throughout the VR system. RSA supports pre-service expertise through student training stipends, as well as in-service expertise through the Comprehensive System of Personnel Development (CSPD) (Larkin, Alston, Middleton & Wilson, 2003), state level in-service training grants and regional training centers. Rehabilitation providers demonstrate some fear and information gaps about mature persons (Swett & Bishop, 2003). Consistent with all previous research (Palmore, 2005), experience alone does not change this, but education-especially to correct misinformation, biases and negative attitudes about aging and mature persons-does promote positive change (Swett & Bishop, 2003). The VR system has existing mechanisms and resources to eliminate staff knowledge gaps, so that agency personnel can apply their unique expertise to enhance work and life outcomes for a maturing workforce.

Individualized Service with Uniform Standards

The Rehab Act created a State-Federal rehabilitation program that is based on individually tailored services, responsive to the unique needs of the person receiving services, with equal planning roles for the person who receives services and the professional. The 1992 Rehab Act Amendments further reinforced the control and involvement of consumers, not just in their individual plan and goals but in the design and structure of the service system, policy and procedures (Sales, 2007).

The VR system has standards and mechanisms to ensure equal access in service delivery (Brabham, Mandeville & Koch, 1998; Sales, 2007). This is critical for mature workers as they experience diverse, complex needs while confronted with ageism and discrimination that restrict life and work outcomes (Dixon, Richard & Rollins, 2003). Older workers are committed, eager to learn and get along with supervisors of all ages, but research also shows that they are perceived as less competent, productive and receive harsher, more negative work evaluations (Palmore, 2005). Actual performance favors mature workers, since experience is a better predictor of job performance than age (Wadsworth, Smith, & Kampfe, 2006). Over the career, groups that experienced discrimination and barriers to work stability, benefits and education, have more erratic work histories as well as less economic security and resources in later life (Stanford & Usita, 2002). These mature workers are more likely to need income from work but experience more disability, and this further restricts options and resources (Stanford & Usita, 2002). VR could equalize work access for mature workers.

The existing array of services, combined with purchasing power to fill in gaps, could also meet the VR mandate to prioritize significant disability, through response to mature workers' needs. VR provides a wide range of potential services, and VRCs and consumers have access to money to purchase unique services (Sales, 2007). The VR service array and flexibility has power to build different life and work outcomes for mature workers. Data analysis from the Longitudinal Study of the Vocational Rehabilitation Services Program (LSVRP) showed that the primary disability of 90% of VR applicants aged 65 was identified as most significant or significant, and more than 70% also had secondary disabilities. Mature workers experienced types of disabilities shared by younger VR consumers and had similar goals and experience (Wadsworth & Kampfe, 2004), thus many existing services are applicable. Since the Rehabilitation Act mandates service priority for those with significant disabilities, enhanced agency emphasis on individualized tailored service to this underserved group could create better outcomes for mature workers, the agency and all of society affected by aging.

Currency in Responding to the Changing Nature of Work

Increasingly, the State-Federal VR agency has been charged with responding to the needs of all constituencies, including employers, as evidenced by the incorporation of the Rehabilitation Act into the Workforce Investment Act of 1998. Service to mature workers can assist the agency in responding to workforce and employer needs by assisting in the retention of highly

qualified, experienced mature workers. Employers are becoming more aware of the tremendous costs when they miss opportunities to attract and retain valuable employees, lose all of the investment made in such employees over time, as well as wrestle with the gaps in skills, experience and institutional memory when such employees leave the organization (Wadsworth, Smith & Kampfe, 2006).

Considerable expertise to expand work options for people with disabilities has developed since the earliest federal effort in 1920 (Sales, 2007). The State-Federal VR system emerged and has continuously adapted to support achievement of life and work goals. This accumulated expertise in adapting to change is critical. To optimize job and career choices, mature workers often need information and specific assistance to navigate world of work changes that occurred after they entered the job market (Galinsky, 2007; Herr, Cramer & Niles, 2004). Employers may also need assistance in responding to motivational differences between younger and mature workers.

Worker survey comparisons between 1977 and 2002 show that people are working more hours and jobs are more demanding in terms of pace & responsibility. More workers report that they are working very hard and can never get all of their work done. Older workers are similar to younger workers in reporting these increased demands. On the positive side, work is offering more chance for growth. Workers report more opportunity to continuously learn, be creative and develop their own unique talents, as well as to have more autonomy and authority to control what happens on their jobs. Work is becoming more personally meaningful, even more so for workers aged 50 and over.

Vocational Rehabilitation Counselors: Powerful Resources

VRC education, experience and current practice align with the needs experienced by mature and maturing workers. In consort with the strengths already described within the VR system, agency staff expertise is a powerful resource to create positive work and life outcomes for maturing workers. These expertise areas include assessment skills; physical and cognitive difference responsiveness; health understanding and management strategies; strategies to promote informed choice and consent; individualized consumer-centered planning; counseling and advocacy-related skills; case or disability management, including resource and benefits coordination; knowledge of local labor market and employers; knowledge of local resources and populations; training

and targeted skill acquisition; accommodation and the use of assistive technology; as well as career development and placement skills.

Assessment Skills

The complexity of physical and mental disabilities and function, psychosocial factors, the importance of social supports and engagement, and the interactive effects of physical and emotional/psychological stressors make assessment critical for effective planning with mature persons (Larkin, Alston, Middleton & Wilson, 2003). VRCs use assessment skills intermittently throughout the rehabilitation process to assist the person in identifying and achieving goals since the Rehabilitation Act Amendments require that planning and service provision reflect the interests, capacities, abilities, skills, strengths and resources of the person. An updated placement role and function study showed placement activities for the non-profit system like VR included considerable exploration time with emphasis on preferences, abilities, goals, transferrable skills and incorporating functional capacities and limitations (Kluesner, Taylor & Bordieri, 2005). Such explorational expertise is precisely the kind of assistance that mature workers need as they attempt to retain or reconnect with employment.

Most mature persons served by VR have experienced onset of disability within five years of service application (Wadsworth & Kampfe, 2004). Sensitivity in assessment to develop responsive plans is especially important for mature workers with late onset disabilities who have already experienced multiple losses. Assessment may be important to help people recognize and redefine their strengths in light of functional change and losses associated with the experience of disability (Finch & Robinson, 2003). Such assessment can be a vehicle to counteract common feelings of helplessness, passive responses and resulting disengagement (Larkin, Alston, Middleton & Wilson, 2003). Strategies such as supportive and informal interview, survey of developed interests and avocations, transferrable skills analysis and situational assessment, all may help to provide new visions of possibility, hope and empowerment. Assessment for assistive technology and accommodations at home or at work may also support adaptation, functioning and success (Finch & Robinson, 2003).

The application of VRC assessment skills can enhance collaboration and effective use of services across systems to spread resources and meet the complex needs of maturing workers. Increasingly, VRCs are providing consultation services in work, legal and medical settings to assist a variety of others in problem solving, synthesizing and integrating information and in developing plans (Estrada-Hernandez & Saunders, 2005). Such

consultation may allow better access to comparable benefits, avoiding service duplication while maximizing service benefits and outcomes for mature workers.

VRC assessment skills also may be of great benefit to employers as they deal with an aging workforce and attempt to maintain organizational efficiency in light of the potential loss of mature workers' valuable skills, years of work performance and experience. In light of these losses, employers will need to provide incentives to keep mature workers on the job (Streblor, 2006). To reduce the risk of reverse age discrimination complaints, employers will also need assistance to ensure appropriate, accurate and reliable performance evaluations (Streblor). Employers may also need VRC assessment skills to adapt the workplace tasks and environment to maximize the contributions of all employees, including those who are aging.

Physical and Cognitive Difference Responsiveness

Responsiveness to difference is the definition of rehabilitation counseling: "a systematic process which assists persons with physical, mental, developmental, cognitive, and emotional disabilities to achieve their personal, career, and independent living goals in the most integrated setting possible" (Section III, CRCC, 2003). Mature workers have considerable diversity in the experience of functional effects due to aging, mature onset disability, and aging with pre-existing disability (Mitchell, Adkins, & Kemp, 2006). To get results, VRCs must tailor responses and interventions to address cumulative effects of disability as well as the differences that occur when people experience disability pre-vocationally, at mid-career or intermittently (Beveridge, Craddock, Liesener, Stapleton, & Hershenson, 2002).

This responsiveness is consistent with the way VRCs provide services to workers across the career span. Mature persons can then define themselves and life beyond limitations and disability. Access to meaningful roles, economic self-sufficiency and engagement to experience strengths are important in adjustment to disability (Olney, Brockelman, & Kennedy, 2004). The same is true for mature persons (Hammerman-Rozenburg, Stessman, Maaravi, & Cohen, 2005; Hinterlong, Morrow-Howell & Rozario, 2007), who experience much more functional limitation than do younger persons (Parker & Thorslund, 2007). Identification of skills and assets, combined with responsive VR services that remove barriers, can allow mature persons to pursue new self definitions as they work toward achievement of goals and expanded work options.

Health Understanding and Management Strategies

Health management enhances overall wellness and function, since physical health problems are one of the two most common reasons for later life emotional difficulty (Konnert, Gatz & Hertzsprung, 1999). Help to develop coping and adaptation skills and to build social support are two proven intervention strategies (Konnert et al.). VRCs routinely help persons with disabilities get answers to health questions, take steps to manage health, promote engagement and activity, and enhance positive and supportive relationships. VRC efforts can thus promote health and wellness and so reduce the risk of physical, emotional and cognitive changes that further limit rehabilitation, independent living and work. (Swett & Bishop, 2003)

Kontosh (2000) aligns the VRC role with advocacy and identifies implications and applications for rehabilitation counselors working in managed care environments. Mature workers must navigate such environments due to health concerns and limitations associated with aging as well as functional limitations from health conditions or disabilities that arose earlier in life. As a result, mature workers often have complex health needs. VR counselors have experience and expertise in understanding and responding to such complexity and can use advocacy skills to assist consumers in negotiating health care to get their needs met.

Strategies to Promote Informed Choice and Consent

To exercise choice, people must be aware and informed about available options. Mature persons often are not informed and are discouraged from making decisions about issues that have major effect on their lives (Kampfe, Wadsworth, Smith, & Harley, 2005). VRCs make special effort to ensure choice for persons with understanding barriers, including help and support to identify interests and goals, since exposure and environment barriers often limit awareness of even the range of possible choices (Beveridge & Fabian, 2007). In light of the cognitive changes that occur with aging, and the mobility and transportation limits that might also interfere with exploration, VRC expertise in promoting choice is a critical asset for an aging population. VRC emphasis on informed choice can provide needed information, reinforce the person's right to make such choices and model and reinforce the skills that are needed to be empowered and to act on such choices.

Individualized Consumer Centered Planning

Partnership with consumers in planning services that respond to the full

range of a person's needs, concerns, preferences and unique assets are part of the values foundation for the VRC scope of practice that includes "Commitment to models of service delivery that emphasize integrated, comprehensive services which are mutually planned by the consumer and the rehabilitation counselor" (CRCC, 2003). Person-centered planning is a growing part of VRC jobs and is valued by consumers and counselors (Hasnain, Sotnik, & Gilhoni, 2003; Wolf-Brannigan, Daeschlein, Cardinal & Twiss, 2000). VRCs place emphasis on helping the person to explore, plan for and enter jobs of their choice (Beveridge & Fabian, 2007). VR has used person-centered planning to include family and culture and to enhance job and service choice awareness and outcomes for consumers of diverse backgrounds (Hasnain, Sotnik & Gilhoni, 2003). Due to the national demographic changes described throughout, person-centered planning may be a very important tool to enhance work outcomes in later life.

Counseling and Advocacy

Counseling and advocacy are foundational to the partnership that promotes outcomes for all persons served by VRCs. VRC counseling and advocacy roles are integrated for mature workers due to age discrimination that is associated with less satisfaction, connection to the job and tenure (Galinski, 2007). Discrimination affects skilled and unskilled workers. Discrimination impact for mature workers as a group has been demonstrated throughout more than 20 years of research.

Mature workers experience more insecure job attachment and, when let go, have a harder time finding new jobs (Moen, 2007; O'Brien, 2007; Sweet, 2007). VRCs use counseling skills to encourage and provide support for job retention, return to work and for entering new careers. The VRC has flexibility to adapt to slower rehabilitation progress and to incorporate the many changes and complex needs of mature workers (Finch & Robinson, 2003). Counseling skills are also important to prevent service failure. Older persons tend to have more negative views and expectations about job searching because job searches take longer (O'Brien, 2007; Rix, 2002). As a result, mature workers are more apt to become discouraged, opt out of the job search and thus leave the workforce involuntarily. They also take a bigger pay cut when re-employed (Markson, 2003; Rix, 2002). Effective VR counseling could prevent these negative outcomes.

The VRC role of advocacy in service to mature workers cannot be understated. Despite legal protections, work discrimination and ageism are common as demonstrated by exclusion, lack of promotion, demotion, harassment and job loss (Roscigno, Mong, Byron, & Tester, 2007). VRC knowledge of employment (e.g., Fair Labor Standards Act), health (e.g.

FMLA) and disability laws and protections (e.g., ADA) are a critical part of the counseling process for all workers and apply to mature workers (Finch & Robinson, 2003). Mature workers do experience disability, so VRCs should already be familiar with the Age Discrimination in Employment Act (Rosigno et al.) and relevant state laws that protect older employees. VRCs routinely address rights related to disability, and this advocacy expertise could enhance mature worker outcomes.

1967 AGE DISCRIMINATION IN EMPLOYMENT ACT (ADEA)

<http://www.eeoc.gov/types/age.html>

-What Employers Are Covered? Those with 20 or more employees; federal, state & local governments; employment agencies & labor groups must comply.

-What Protections Exist? Persons aged 40 or older must not be discriminated against in hiring, pay, benefits, layoff or firing, promotion, training, apprenticeship opportunities, job duties or any other aspect of employment. Persons who bring forward age discrimination complaints are also protected from retribution.

-How is the law enforced? Similar to the Americans with Disability Act, charges can be filed with the Equal Employment Opportunity Commission (EEOC).

-How can I learn more? The EEOC provides fact sheets on types of discrimination for varied populations and audiences; guides to the process of filing charges and the mediation process; as well as general information such as statistics and litigation.

-How can I reach EEOC? There are 15 field offices around the country. Entering EEOC in a web browser will bring up the main EEOC page. A link under the How to File a Discrimination Claim heading brings up a map of the US. Clicking on the map brings up information for that specific field office. Inquiries and requests for information may also be addressed by email to info@eeoc.gov or by phone at (800) 669-4000, TTY (800) 669-6820.

Case or Disability Management Including Resource and Benefits Coordination

Mature workers experience complex needs that may include assistance with psychosocial and family adjustment, financial and benefit coordination, housing, work and emotional support. To meet such needs, coordination and collaboration with multiple services and providers are necessary

(Harley, Donnell, & Rainery, 2003). Mature workers may need help in understanding and accessing benefits. Especially when experiencing late onset disability, the person may experience substantial economic losses and may need assistance in accessing a host of services with which they are unfamiliar (Finch & Robinson, 2003). VRCs can provide information about benefits and community resources to fill in such knowledge gaps (Doyle, Dixon, & Moore, 2003).

VRC case management expertise, with follow-up for service success and satisfaction, may also ensure that mature persons are served adequately and appropriately. Persons with multiple stigmatizing characteristics (age, disability, sex, race) experience amplified discrimination, known as double jeopardy (Palmore, 2005). This affects mature persons with disabilities when trying to get resources, healthcare or services (Sheets, 2005) and may result in triple or quadruple jeopardy if gender and race are included (Palmore, 2005). Kontosh (2000) emphasizes the VRC role in promoting awareness of additional resources and services, as well as in service access. This is especially crucial for mature workers who face varied barriers from internalized ageism as well as from active or passive discrimination in service systems and from providers.

Knowledge of the Workplace and Employers

VRCs functioning as Disability Management Specialists can help employers determine the needs of their maturing workers and design programming or training to help employers retain the skills of those workers (Dixon, Richard & Rollins, 2003). Above all else, mature and maturing workers seek flexibility in work to manage life, work, health and functioning demands so that positive quality of life can be maintained. VRCs and other rehabilitation professionals can help employers to consider ways to make the workplace barrier free, as well as sharing strategies used by employers similar to those described in Chapter 3 that enhance flexibility through worker friendly policies and practices. Since VRCs possess a range of skills and contacts with varied employers, they can share employer practices that promote flexibility.

VRC connection to seasoned workers can also enhance and expand positive employer relationships as mature workers help to meet employer staffing demands. Mature workers are a critical asset for employers because of their skills, worker qualities and leadership on the job. Mature workers can help stabilize the workforce for employers and this can create positive perceptions of the VRC, agency and any future referrals. Mature workers express more job satisfaction and intend to stay longer with the employer

(Strebler, 2006). Employers that now employ seasoned workers report that they evidence greater reliability, responsibility and better communication (Schwinn, 2007), all of which promote better climate and functioning of the organization.

Evidence shows that ageism, stereotypes and misinformation about mature persons continues across all segments of society, including the world of work (Rosigno, Mong, Byron & Tester, 2007). Education to correct misperceptions is the primary factor that creates lasting change in attitudes toward older persons (Palmore, 2005). VRCs have considerable experience educating employers, supervisors and co-workers to overcome bias toward workers with disabilities. This educational expertise could be used to shift workplace bias toward mature workers.

Employers and maturing workers may also benefit from strategies to keep people on the job. VRCs can offer help to employers and workers with disabilities to identify accommodations and prevent the early retirement noted for persons with disabilities during their 40s (Mitchell, Adkins & Kemp, 2006). VRCs can share information about strategies that work to help employers meet labor needs while allowing workers heading into retirement to remain engaged and productive. Phased retirement allows workers to cut back on hours and responsibility (Markson, 2003) with work arrangements like job sharing, reduced hours or days of work or consulting opportunities (Clark & Quinn, 2002). Phased retirement is more common in education and government, but a national study recently showed that 23% of employers surveyed offered some phased retirement option. Other mature workers are attracted to part-time or temporary 'bridge' jobs after they retire from their primary occupation (Clark & Quinn, 2002). Often people choose some form of self-employment as a bridge job, with an emphasis on job demands that are flexible and match both capacities and skills (Markson, 2003). VRC knowledge of the job market, local needs and relationships with employers can make the workplace more accessible, help mature workers use their skills and promote a wider range of work options for mature workers.

Training and Targeted Skill Acquisition

In Chapter One, Baby Boomers were identified as more educated than any other group that has ever entered maturity. Baby Boomers are joining all of those people who are already mature and who had much less consistent access to secondary and higher education. When all mature persons are combined into one group and compared to other groups within the United States, findings related to education change dramatically. Mature persons

have had least educational access and work the least hours compared to any other group, including women or people of color (Palmore, 2005).

College-educated persons with disabilities get jobs and can stay on the job longer, possibly because they have more choices in jobs and environmental demands and receive more pay and benefits. They may also experience greater flexibility and job tenure because with employer valued skills, they may be in a better position to request work variations to stay on the job (Mitchell, Adkins & Kemp, 2006). VRCs have considerable expertise in helping people with disabilities access and succeed in education.

VRCs may also assist mature workers to develop the specific skills needed for independent living and job success. VRCs may teach adaptive coping skills while assisting the person with accommodations to reduce barriers at home and at work (Finch & Robinson, 2003). Continuous training and skill updates are essential to keep mature workers on the job (Rix, 2002). Mature workers may need VRC encouragement and advocacy to optimize skill flexibility, since ageism may inhibit access to training. Only 9% of people under the age of 65 thought mature persons were adaptable and open minded, but 55% of mature persons described themselves in this way (Cutler, 2005). VRC advocacy and support for skill training could create better outcomes for mature workers and employers.

Accommodation and Assistive Technology Use

Assistive technology use is imbedded in the VR system and has been a mandated part of the rehabilitation plan since the Rehabilitation Act Amendments of 1992. VRCs are required to assess assistive technology applications to help the person meet the long-term goal and all of the steps to achieve it (Estrada-Hernandez, Wheaton, Dawson & Krispinsky, 2007). As a result, VRCs have daily practice in the use and application of technology and accommodation. Such expertise is important since research has demonstrated the importance of AT to enhance vocational options, success on the job and in independent living, as well as in the rehabilitation counseling process (Estrada-Hernandez et al.). VRC interventions may be needed intermittently to enhance employment retention, since over time aging with disabilities may create needs for new or different accommodations to support function. Accommodation can promote work retention by supporting daily living activities needed to get ready and go to work and by reducing cumulative negative effects on the body from repeated work activities and efforts (Mitchell, Adkins & Kemp, 2006).

Older Americans Act of 1965 (www.aoa.gov/oa2006/Main_Site/index.aspx)

- *Who is covered? Employment services at age 55, other services at age 60.*

- *What types of services are offered? Employment, nutrition, housing & transportation, leisure, benefits and advocacy assistance, elder protective services, mental and physical health promotion, information and referral, caregiver supports, other services as needed in local area. The 2006 Amendments expanded Aging & Disability Resource Centers to all states, emphasized consumer control through 'self-directed care' provisions, and gave states and consumers greater flexibility to collaborate with other programs to meet home and community service needs.*

- *Who administers these programs? The Administration on Aging has oversight of services under the act. Services are organized and channeled through the Aging Network comprised of tribal, native and state units as well as area agencies on aging. Services are provided by an array of organizations, individuals and volunteers.*

- *How can I find out more? Information can be obtained by accessing the Administration on Aging website www.aoa.gov. Information can also be obtained by contacting the Area Agency on Aging or the Aging and Disability Resource Center nearest you.*

Career Development and Placement Assistance Skills

VRCs have expertise in identifying transferable skills. This is important to mature workers since studies using national samples show an expansion of job insecurity even for the most skilled workers (Sweet, 2007). While only a portion of later life job changers, some mature workers move into different and fulfilling careers at retirement (Rix, 2002). VR, with understanding and support for career development, could assist more mature workers to experience such positive expansion and career opportunity. Since workers with disabilities leave work at much earlier ages (in the 40s compared to the late 50s or 60s for workers without disability), VRCs may need to take more of a career development approach to placement assistance and accommodation, since the person may need intermittent help to make adjustments and stay in the workforce over the career span (Mitchell, Adkins & Kemp, 2006). Since many mature workers either choose or need to continue to work, VRCs can provide career and vocational counseling relevant to maturing workers (Dixon, Richards & Rollins, 2003) to assist them in identifying jobs that will match their career preferences and needs.

VRCs may need to take a more active placement role with persons who want to enter new careers. With late onset disability, the person may have been with the same organization for most of the career and may have no idea about how to navigate or negotiate a job search. Considerable encouragement and support, as well as concrete skill assistance may be needed (Finch & Robinson, 2003). Awareness of strategies for persons experiencing late onset disabilities is important since most mature VR consumers experienced onset of disability within 5 years of application (Wadsworth & Kampfe, 2004). The person may also be entirely unfamiliar with current job search strategies such as resume development or the use of a functional resume commonly used by VRCs to highlight the strengths of workers with disabilities. The mature worker may also need assistance in responding to application and interview questions. VRCs can also facilitate job search and employment success by helping the mature worker to identify jobs with essential functions that match abilities and accommodations to enhance function in the environment (Finch & Robinson, 2003).

Summary

The state-federal vocational rehabilitation system and trained rehabilitation counselors are uniquely situated to respond to the needs of an aging workforce. The state-federal VR structure, the way services are provided as mandated by the Rehabilitation Act, and the complex networks that have been developed as a result of many years of service delivery uniquely position the agency to respond to demographic trends and the needs of all affected by the changing workforce.

The chart below summarizes the match between the vocational rehabilitation system and mature and maturing worker needs.

MATURE WORKER AND VR SYSTEM MATCH

MATURE WORKER NEEDS

- Success in Navigating Change
 - Health and Disability Limits
 - Psychosocial Factors
 - Social Support Context
 - Barriers & Stressors
 - Service & Workplace Access

SYSTEM CHARACTERISTICS & PROFESSIONAL EXPERTISE

- Assessment Skill to Incorporate
 - Preferences & Goals
 - Abilities & Transferable Skills
 - Resources
 - Functional Capacity/Limitations
 - Accommodations

MATURE WORKER NEEDS

- Physical & Cognitive Changes
 - Mature onset disability, aging, lifelong cumulative disability
 - Work tolerance: stamina & pace
 - Affective response to changes
- Health Understanding & Management
 - Wellness to reduce physical, cognitive & affective impacts
 - Medical & health information, support for action steps
- Empowerment via Informed Choice & Consent
 - Often not informed and discouraged from making decisions
 - Limited exploration
- Explore, Plan for, Enter & Retain Job of Choice
 - Increasingly diverse mature population
 - Intervene prior to retirement for persons aging with disability
- Counseling & Advocacy
 - Age discrimination
 - Complex needs: often more time & help to make change
 - Longer job search if dislocated
 - Often discouraged and drop out of job search

SYSTEM CHARACTERISTICS & PROFESSIONAL EXPERTISE

- Orientation to Disability
 - Engage to experience strengths
 - Disability protections, benefits, supports, accommodations
 - Distinguish disability & aging
- Promote Health & Function
 - Medical service & information, equalized access
 - Lifestyle change support, early intervention, advocacy
- Partnership in Process
 - Support to identify interests, goals & service options
 - Information & reinforced rights
 - Modeled & reinforced skills to act on choices
- Individual Person- Focused Planning
 - Family and culture
 - Enhanced service & goal awareness
 - Incorporate retirement planning for all persons with disabilities
- Equal Access
 - Equal opportunity via service & accommodation to act on rights
 - Encourage & support career choices, advocacy, legal protections
 - Counseling & process adapted

MATURE WORKER NEEDS

- Resource & Benefits Coordination
 - Psychosocial & family adjust, finances & benefits, housing, work and emotional support
 - Often unaware of services
 - Vulnerable to differential service provision based on age, disability, ethnicity
- Access to Job Opportunities & Job Retention
 - Current and anticipated functioning and work barriers
 - More jobs for all persons with disabilities
 - Bias and misinformation in the workplace
 - Exhausted adaptation effort causes early retirement
- Meet Unique, Diverse Needs
 - High proportion of significant and multiple disabilities
 - Varied resource/support needs
 - Disempowering experiences heighten need for respect, choice, autonomy & capacity
 - Long-term supports, services to retain function, capacity & positive quality of life
 - Diverse mature workers

SYSTEM CHARACTERISTICS & PROFESSIONAL EXPERTISE

- Case or Disability Management
 - Coordinate services, interact with others, monitor progress, problem solve
 - Benefit & community resource information
 - Follow up to ensure satisfaction & that needs are met
- Workplace & Employer Knowledge
 - Relationships with Employers around the US
 - Help employers understand needs & train/program to retain
 - Educate employers, supervisors & co-workers about disability & mature worker contributions
 - Accommodate & assist employer to expand alternate work/phased retirement options
- Local Resource & Population Expertise
 - Service array to reduce disability barriers, funds to address gaps
 - Collaborative experience across community for disability needs
 - Interdisciplinary teams: Assist all providers to understand and accommodate disability
 - Coordinate with Older American Act partners
 - Service expertise

MATURE WORKER NEEDS

- Training or Specific Skill Development
 - Skills to cope, adapt, accommodate
 - Tailored education to promote career development & job choice options, flexibility
 - Independent living & work adaptation skills
 - Technology skills
- Accommodations & Assistive Technology
 - Enhanced job choice & success, independence in living
 - As person ages with disability emergent technology and accommodation needs
 - Assistance in getting ready for and going to work
 - Cumulative impact of repetitive activities at work or home
- Career Development & Placement
 - Career development for flexibility as person ages with disability
 - Active placement help with late onset disability
 - Updates on job search strategies

SYSTEM CHARACTERISTICS & PROFESSIONAL EXPERTISE

- Targeted Skill Training
 - Combine training and accommodations
 - Promote skill training access
 - Analysis of transferrable skills and support for skill upgrades to fit labor market
 - Training modification expertise
 - Technology tutoring & support
- Imbedded Accommodation throughout Process
 - Assess assistive technology for plan and throughout all steps
 - Intermittent services may be provided as the person ages
 - Assistive technology can promote barrier free environments
 - Consultation may expand technology use & awareness
- Career Counseling, Job Analysis, Development, Accommodation, Placement & Job Adjustment Services
 - Transferrable skills identification
 - Assist with match of essential functions and accommodations
 - Assist with resumes, self presentation, disability disclosure

Self Study Questions—Chapter 2

1. T/F Mature workers evidence more reliability, responsibility, communication skills, job satisfaction and leadership roles that help to enhance organization efficacy but employers, co-workers and supervisors may need training about mature workers and disability.
2. Since the first effort to research and address the rehabilitation needs of aging persons in 1984, VR and the rehabilitation field have been encouraged to recognize:
 - a) mature persons need a very different, highly specialized, array of interventions, services and supports.
 - b) Issues and needs for mature persons are similar to those for younger persons with disabilities.
 - c) While fewer mature persons experience disability, work productivity is important.
 - d) Services should be provided by Older American Act agencies, since they understand mature persons.
 - e) All of the above.
3. The VR system is well-designed for service to maturing workers because of
 - a) Nationwide localized expertise that focuses on work and independent living.
 - b) Federal mandates that mature workers be given priority in service.
 - c) Flexibility to develop new services to address the very distinct service goals of mature persons.
 - d) Individual service but uniform standards have little impact since most work barriers are physical.
 - e) All of the above.

4. As a group mature persons experience
 - a) More severe and multiple disabilities with less medical help to address psychosocial aspects and adaptation.
 - b) Disabilities and health conditions that are very different than those experienced by younger persons.
 - c) Mostly health conditions that employers and the person can easily accommodate to retain employment.
 - d) Disabilities that limit function so that the person has no desire or need for employment.
 - e) All of the above.
5. VRCs have varied expertise to help mature and maturing workers keep and get jobs by:
 - a) Understanding limits as disability related since workers can then ask for and are more successful in getting accommodation.
 - b) Use of assessment that includes adequate exploration time so people recognize a lifetime of strengths and integrate functional change.
 - c) Helping the person and the employer understand and respond to cognitive changes, and help the person with health management.
 - d) Promote and reinforce the person's rights, provide information about range of options, and develop skills to make informed choices.
 - e) All of the above.

Chapter Three

The Changing Needs of Employers

You need to know that

Employers are faced with an employee shortage due to Baby Boomer retirement age

Employers need to identify ways to retain and attract qualified workers who are aging

Employers are moving to Talent Management as a means to attract and retain workers

Talent Management is a strategic approach to attract, retain, develop, and train employees

VR counselors need to reposition themselves as consultants in meeting short- and long-term retention and hiring needs

VR counselors can improve their relationships with employers by showing a clear and authentic interest in the employer's needs

VR counselors can help employers by understanding their needed employee skill sets

VR counselors can help employers by providing older disabled workers who match their needed skill sets

VR counselors can partner with already existing job programs for older people

Senior Community Service Employment Programs (SESEPS) focus on training and placement of older workers

There are many examples of employers who have designed programs to meet the needs of older employees

Skills shortages, current and future

The changing demographics of the workplace coupled with current and future skills and talent shortages will have a significant impact in how employers recruit, retain, and develop their talent. Employers will be implementing talent management and development strategies, in order to meet their short and long-term goals. Thus, VR Counselors will need to understand talent management in order to get their clients age 50+ employed. Throughout this chapter, the terms older workers and older workers with disabilities are used to illustrate various points related to working with employers, since the idea of accepting older workers with disabilities is first predicated on the acceptance of older workers.

In order to understand how employers engage Talent Management, it is important first to define talent. Talent can be defined as the total of an individual's innate abilities – from technical skills to the soft skills like judgment and experience, many of which are present in workers age 50+. (Michaels, Handfield-Jones, Axelrod, 1997, page 3). According to a Tower's Perrin Report on Talent Management, "Talent is not a euphemism for the workforce in general. Companies have a very precise definition of talent focused on leadership and key professional and technical contributors, and the size of the talent pool averages about 15% of the total workforce." (Towers Perrin 2005, Executive Summary, page 3)

As employers continue to face skills shortages in key areas of their organizations, they will increasingly need to find alternative sources for talent – sources that they may have previously not considered. According to an AARP research study, "more than half of HR managers say that it's more difficult today than it was five years ago to find qualified applicants for management and non-management positions." (Brown, 2005).

Due to the dramatic demographic changes and the resulting shortage of

those with scarce skills, some organizations are focusing on recruiting and keeping employees over 50. As a result, employers will have to re-assess many of their practices such as recruitment, training, benefits packages and work design. (Mullich, 2003) Consequently, employers will seek new, innovative, and cost effective measures to recruit and retain, and develop key talent. Putting into place job arrangements that appeal to mature workers will grow in importance if companies are to avoid failing in today's economy. "For example, 'Phased Retirement, which allows the employee to reduce work time in his or her current job, is regarded as one strategy to encourage hard-to-place, experienced workers to postpone leaving the labor force.'" (AARP, 2006, p. 2) "If companies begin to think about the disability community in terms of capabilities, unique attributes and powerful assets, a new virtually untapped talent pool opens up that could be lucrative for corporations" (Kaufman, 2007). As a result, the VR system is in a unique position to help identify and source the skill sets that employers are seeking, with mature workers.

Trends in talent planning and development

Fifty-eight percent of HR managers surveyed by Towers Perrin report that finding qualified applicants is more difficult today than it was five years ago, underscoring the imperative to retain mature, experienced workers. (American Business and Older Employees: A Focus on Midwest Employers, AARP, 2005) In addition, "America's largest 500 companies will lose 50% of their senior managers in the next 5 years, according to RHR International" (Success Factors and BPM Forum; 2007 Performance and Talent Management Trend Survey)

There are factors beyond the aging workforce that are causing difficulties for employers. Organizations are dealing with globalization and continuous growth in the economy, which lead to fierce competition for the pool of talented workers. (Success Factors and BPM Forum. 2007 Performance and Talent Management Trend Survey, Introduction, page 2).

According to the 2007 Performance and Talent Management Trend Survey, "Talent development was indicated as the No. 1 human capital challenge of 2007, followed by retention and turnover, and talent acquisition. There are many reasons attributed to human capital being the number 1 challenge but the top 3 drivers for talent acquisition are company growth, evolving corporate cultures, and changing market demands" (Success Factors and BPM Forum; 2007 Performance and Talent Management Trend Survey).

As a part of talent planning, succession planning has traditionally been

associated with senior executives or “C” suite individuals. However, in a recent survey conducted by Novations Group, a global consultancy firm based in Boston, more organizations are viewing succession planning as necessary for other levels in an organization. “Three-fourths of large organizations perform succession planning; among that number, 63 % focus on the senior level, but 46 % have broadened that to include mid-level managers.” (March 12, 2008)

The talent planning needs of employers:

As the demographics of the workplace change as a result of Baby Boomer retirements, employers are finding the need to incorporate talent planning in development in their overall operations and focus on the talent needs of the organization in order to meet short and long-term business goals.

Traditional human resource management and measurement practices are declining. Skilled workers are becoming scarce in a dynamic global environment. Thus, organizations will need to take a strategic approach to talent management if they are to make any headway in attracting and retaining a capable workforce. (Next-Generation Talent Management: Insights on How Workforce Trends Are Changing the Face of Talent Management, by Elissa Tucker, Tina Kao, and Nidhi Verma, Hewitt Associates page 8).

Doing so will require that companies break new ground to meet their employment needs. This means recruiting older and retired workers as well as former employees. (Next-Generation Talent Management: Insights on How Workforce Trends Are Changing the Face of Talent Management, by Elissa Tucker, Tina Kao, and Nidhi Verma, Hewitt Associates page 12.

According to SHRM’s 2006 Talent Management Survey Report, “53% of organizations have specific talent management initiatives in place. Of these companies, 76% consider talent management a top priority. In addition, 85% of HR professionals in these companies work directly with management to implement talent management strategies.” (Fegley, 2006) Thus, the human resource function in an organization is viewing talent management as an increasingly important function of its responsibilities (Fegley, 2006).

This will create an enormous opportunity for VR to position itself as a strategic staffing resource for employers provided VR makes some adjustments to how it works with employers and capitalizes on the skill sets that its consumers that are age 50+ possess.

History and definition of talent management:

A brief historical overview of talent management helps to put these evolving needs into context and will provide some background information for the VR counselors on what employers are experiencing.

Over the past 20 years or so, Human Resources has evolved from being more of an administrative function, focusing primarily on payroll and benefits, to more of a strategic role as the importance of human capital has increased in importance to the level of other assets, e.g. brands intellectual capital, and proprietary networks. See the table below for a comparison of the old and new way employers view talent.

	The Old Way	The New Way
Talent Mindset	HR is responsible for people management.	All managers – starting with the CEO – are accountable for strengthening their talent pool.
Employee Value Proposition	We provide good pay and benefits.	We shape our company, even our strategy, to appeal to talented people.
Recruiting	Recruiting is like purchasing.	Recruiting is like marketing.
Growing Leaders	We think development happens in training programs.	We fuel development through stretch jobs, coaching, and mentoring.
	We treat everyone the same, and like to think that everyone is equally capable.	We affirm all our people, but invest differentially in our A, B, and C players.

(Michaels, Handfield-Jones, Axelrod, 1997, page 16)

Now, Talent Management is the strategic approach businesses use to attract, retain, develop, and train their people. It also includes how companies measure and increase the performance of the individuals that make up its workforce. (Fegley, 2006, page v) The term “Talent Management” is a relatively new one, having been created by the management consulting firm McKinsey & Company following the release of a 1997 study, the outcome of which highlighted the strategic importance of talent management to a company’s overall success.

As a result, talent management strategies are designed to attract, develop, retain and use employees with the necessary skills and aptitude to meet a business's current and future needs. VR counselors will need to re-position their roles with employers so that they are viewed as consultants to employers and be able to help them meet short and long-term hiring needs with mature workers with disabilities, as well as helping to address the changing needs of the employers' aging workers.

The Talent Management process

To succeed, organizations need to have processes that ensure the right person is in the right job in a timely fashion. Talent management includes planning and marketing to those with the necessary skills. Moreover, organizational productivity encompasses concentrating on new employees, keeping those with talent and placing workers where they can make a maximum contribution.

In short, "(t)he goal of the talent management process is to increase overall workforce productivity through the improved attraction, retention, and utilization of talent." (Sullivan , 2004)

Primary Principles of Talent Management

Following are the main components of talent management:

- Integration within the human resources organization to enable smooth interactions between programs and functions.
- Incorporation of basic talent management concepts with business processes. Included are processes such as strategic planning, budgeting, and research and development.
- Moving accountability to management. Talent management thereby becomes a critical responsibility of line managers.
- Making productivity the critical variable. The measures of success become those associated with workforce productivity rather than human resources and recruiting indicators.

Thus, VR will need to become a resource for employers in determining the types of skill sets an employer requires as well as training its clients age 50+ to meet the skill set requirements. In other words, it will need to become part of the talent management process of any given organization.

Finding the Right People

As noted earlier, employers must become more strategic in their approach to employee recruitment. The competition for those with essential skills will dictate a strategic, rather than administrative, view. This strategic view will need to focus on ensuring there is adequate pool of talent to draw from at each level in an organization, increasing the employers ability to ensure talent stays with an organization, conducting a gap analysis of the organization's competency needs verses the pool of available candidates, ensuring that workplace polices and procedures encourage career growth and individual development opportunities. (Fegley, 2006, page 10)

Companies will need to broaden their horizons to address staffing needs. In addition to recruiting older and retired workers, they will need to actively seek workers with disabilities. IBM, for example, realizes the importance of this employee segment, reporting that disabled workers contribute millions to the bottom line and many (42%) have contributed their skills in a myriad of functional areas in the organization including marketing, IT architecture, and software engineering. Managers at IBM receive special training on recruiting disabled employees (Tucker, Kao, & Verma, 2005). Mounting evidence – both anecdotal and statistical - demonstrates that workers 50+ bring experience, dedication, focus, stability, and enhanced knowledge to their work (Towers Perrin, The business case for workers 50+, p. 11). Older workers are more motivated to exceed expectations on the job than their younger counterparts are. (Towers Perrin, The business case for workers 50+, p. 11)

As employers have positive experiences with hiring mature workers because of their dedication, focus, stability, and experience, more will focus on their workplace preferences in order to attract and retain them. "However, relatively few companies thus far, have positioned themselves for the coming workforce demographic shifts." (Towers Perrin, The business case for workers 50+, p. 11)

This is an excellent time for Vocational Rehabilitation departments to promote the skill-sets that VR consumers who are age 50+ possess, and the department itself as a vital source of staffing solutions.

Employers need to recognize that VR consumers come with a network of supports such as screening, training, and rehabilitative technology.

As a result, VR will need to re-examine how it works with employers to ensure that the current workforce development model in place is consistent with the direction employers and workforce development is heading, and

that that the skill sets of its 50+ consumers can meet employers' short and long-term hiring needs.

New ways VR can work with Employers and the Workforce Development Community

Working with employers is not new for the VR system or VR Counselors. Effective partnerships between VR and businesses have existed for many years. In fact, the 32nd Institute on Rehabilitation Issues focused on the VR Business Network. It covered:

- Building, formalizing, or expanding a VR-business network at the state, regional/multi-state, or national level;
- Dual-customer (business and individual with a disability) perspectives on the VR-business network;
- Critical network components for VR-business partnerships and the progression steps for strengthening the VR-business network;
- Supports and partnerships that impact the VR-business network

(August 2006)

The 32nd IRI, however, did not cover the “how-to’s” of working with employers in the context of an aging workforce which are discussed below. It is important to note that there are a significant number of small businesses (fewer than 500 employees) in the United States that are potential employers for VR’s clients, in addition to the large companies that may typically comprise an employer outreach strategy (U.S. Small Business Administration, 2009). “Small businesses can play an important role in VR placement efforts as they provide the first job for 67% of workers and offer them training and basic skills.” (International Association of Jewish Vocational Services, 2007, p. 9)

Why this is important is that mature workers can be of great help to a small business. “Experience can be very powerful, especially when it is used to help small companies grow and position themselves in the marketplace (http://www.aarp.org/money/careers/employerresourcecenter/recruitment/the_value_of_older_mature_workers.html.) At the same time, smaller employers are less likely to proactively recruit people with disabilities, for fear of the additional costs involved or perceived challenges they would

bring. However, these same small employers are equally feeling the effects of the aging workforce and are facing skills shortages as are large employers, providing an opportunity to change the perception of mature workers with disabilities and help them with their staffing needs.

Large employers, on the other hand, often have HR departments that handle talent planning and training and development. As a result, they are more likely to recruit persons with disabilities. In a Cornell University study on HR’s role in managing disability in the workplace, “nearly half (48 %) of the private-sector respondents reported proactively recruiting persons with disabilities. There was a statistically significant difference by organization size, with larger-sized employers (500-plus employees) more likely than smaller employers to report that they proactively recruit people with disabilities (55 % vs. 39 %).” (Bruyere, Erickson, VanLooy, 2000).

Thus, the following four steps are ways VR departments can ensure their operating model is demand side (employer focused) to meet the needs of the employer community:

Step One: Establish a Relationship

Employers in all sectors will need to find new sources of employees as well as retain current employees post retirement age during the next two to five years. Organizations will need to ensure that their human resources policies are geared toward conservation of all employees (Rix, 2001, 2002; Yeatts, Folts, & Knapp, 2000). Conservation policies tend to be more worker friendly and try to reestablish the individual-job fit for workers as changes take place. This may include training for older workers to help them understand newer technologies, gradual training on changing processes, and management efforts to address concerns (Yeatts, Folts, & Knapp, 2000). These conservation policies are particularly important for older adults and those with disabilities.

The aging workforce is an opportunity for vocational rehabilitation departments to strengthen established employer relationships and to add new employers to the networking pool by promoting mature individuals with disabilities for positions.

Networking, recruitment, market projections and plans, and supports are strategies typically used by employers to maintain necessary employee levels and partnerships. Vocational Rehabilitation departments can be a key asset for companies trying to develop more conservation policies for their workforce. Thus, the first step in working with employers is to

survey the employer landscape in the area where the VR office is located. This can be accomplished by obtaining employer information from the local chamber of commerce, local Society of Human Resources Chapter or other business and industry groups.

The second step is to identify the right person in the organization to contact. In addition, identify who in your organization may know someone in a decision-making capacity at the employer or if the organization has had a previous history with the employer. Consider having your regional director contact the CEO of the employer. Other options are to identify the local recruiters of the employer whose role with their organizations will vary depending on the size of company. Larger employers may have people in their HR departments whose sole responsibility is recruiting, whereas in smaller companies recruiting may be one of many functions of an individual, e.g., the owner. (International Association of Jewish Vocational Services, 2007, p.13.) The third step is to develop outreach programs to convince employers at the corporate and local levels about the benefits of hiring mature workers with disabilities. Although there are many myths about older workers which may be the source of discomfort for a smaller employer, there are a number of attractive reasons to hire older people that sometimes go unnoticed by human resource personnel. Understanding that older adults who are disabled require considerations will help human resource professionals adapt policies and programs to entice some of the “768,000 persons age 55 to 74” who want to return to work (GAO-02-85, 2001, p. 22).

Step Two: Create a Network

There are several steps to build a strong network which include: taking inventory and identifying all current and potential resources, listing priorities and goals, and establishing contact lists.

According to Aronson (2002), effective networking practices include the following actions:

Engage in an ongoing study and evaluation of the organization’s current efforts to promote diversity and hiring practices

- Address any policies and practices that present ongoing barriers for individuals with disabilities
- Conduct periodic reviews of policies and programs to establish how well they are working

Define carefully and accurately the job selection criteria and particular skills and abilities required by the employer

- Conduct a periodic accessibility audit of the physical work environment
- Create a tailored disability awareness presentation for the individual employer
- Provide a single liaison for the employer to assist with questions and resources as needed

Vocational Rehabilitation departments use several avenues when networking with companies. At the state level many organizations exist. One such organization is the South Carolina Vocational Rehabilitation Business Partnership Network (VRBPN) that includes over 100 businesses. The network provides leadership in disability employment awareness by addressing disability related issues in the workplace, dispelling myths about disabilities, and sharing information with other employers. Similar organizations exist in other states (South Carolina Vocational Rehabilitation Department, 2006). Additionally, each state has a network of businesses which provide work for work training centers and hire rehabilitated clients.

State and local agencies work with chambers of commerce, give presentations to community groups, and provide business oriented groups with information on the opportunities for recruiting VR consumers. For example, South Carolina’s VR Department presented to a local Information Technology (IT) Industry Council on VR services and supports. The response was enthusiastic and the business leaders were open to Vocational Rehabilitation as a resource to access potential qualified new employees for their IT positions. In the short term, employers will use traditional methods of recruiting individuals such as in-house HR departments, executive search firms and temporary agencies unless Vocational Rehabilitation departments can be viewed as a source to address some of their hiring needs.

The central focus in development of an effective relationship with an employer is a clear and authentic interest in that employer’s personnel needs. The fundamental basis of the demand-side model is in assisting employers to reach out to people with disabilities to solve their company’s personnel needs. We can develop an effective relationship with an employer to the extent we can convince them that we interested and can help them solve their short and long term personnel needs. (Gilbride & Stensrud, 1995)

Step Three: Provide Expert Services

In an employer focused (demand-side) workforce development model, VR counselors essentially are consultants to employers, providing their expertise in recruiting, retaining, and training mature workers with disabilities. They can help employers in their Talent Management activities including creating job descriptions, recruiting, providing training to workers, both with and without disabilities, as well as help HR staff determine what workplace accommodations may be needed. (Gilbride & Stensrud, 1995)

In the employer-directed model, VR counselors will need to re-position their roles with employers so that they are viewed as consultants to employers and be able to help them meet short-term and long-term hiring needs with mature workers with disabilities as well as helping to address the changing needs of the employers' aging workers. Thus, VR counselors will need to be able to provide the following services to employers:

- On-site job analyses to determine essential functions
- Developing job descriptions
- Cost effective accessibility plans
- Ergonomic evaluations
- Identifying and instituting reasonable accommodations and assistive technology solutions
- Providing training on disability related topics
- Technical assistance in complying with the ADA and other state and federal laws
- Disability management and occupational safety programs
- Assistance in recruiting and hiring employees with disabilities
- Assisting employers to support career development of all employees with disabilities (and job saves)
- Coordinating rehabilitation/disability services for employers.

The majority of the specific services the demand-side specialist provides to employers are services that many rehabilitation counselors have historically provided. The central difference is that the demand-side

specialist provides these services generically to employers, not merely to support the placement of a specific consumer. A second difference is in the demand-side specialist's interest in helping employers find and recruit people with disabilities, rather than being only interested in placement of agency caseload consumers. (Gilbride & Stensrud, 1995)

Thus, VR Counselors can work to sell the generic skill-sets of their consumers age 50+ as means of meeting an employers recruitment challenges.

Step Four: Build on Employer and Community Partnerships

Once rehabilitation professionals are viewed by employers as resources, they are in positions to better inform rehabilitation agencies about current and long-term placement opportunities. Demand-side placement professionals can then act as consultants to rehabilitation counselors providing accurate and timely labor market information that those counselors can use to inform and improve individual rehabilitation (employment) plans. This saves money for agencies that find themselves paying for training only to learn consumers are prepared for jobs that do not exist. Further, consumers benefit by being empowered to make decisions on career goals informed by current, valid labor market information. (Gilbride & Stensrud, 1995)

VR counselors will need to expand their relationships with community partners, rehabilitation counselors, other disability professionals, and other workforce development agencies in the community. The role of the counselor includes:

- Educating rehabilitation counselors and other disability professionals in the entire community about employers' current and long-term personnel needs.
- Accessing and analyzing labor market data from local, state, and national resources
- Assisting rehabilitation professionals to use labor market information in the development of rehabilitation plans for specific consumers.
- Developing relationships with other employment service agencies in the community.
- Developing disability-related training consortia made up of networks of smaller employers.

A new challenge for the demand-side specialist is in developing effective consulting relationships with their own agency and the broader disability community. Quality employment opportunities will be enhanced for people with disabilities to the extent that labor market information is available and utilized during rehabilitation planning. Real consumer choice occurs when the individual has accurate useful labor market information. We can enhance the quality of placement if employers are supported in making work places accessible (in a broad, rather than narrow sense of that word), and consumers understand labor market trends, and skills they will require to succeed. (Gilbride & Stensrud, 1995)

In addition, VR counselors should partner with other organizations in the community that are focused on Workforce Development. For example, AARP Foundation Senior Community Service Employment Program (SCSEP) has nearly 80 project sites in 22 states and Puerto Rico. About 10,000 job seekers are enrolled at any one time. The AARP Foundation SCSEP program is funded by a grant from the U.S. Department of Labor with support from AARP and the AARP Foundation, and provides comprehensive training and support to individuals that will help them:

- Obtain new job knowledge
- Enhance their skills
- Gain a competitive edge in today's job market

To be eligible, applicants must be:

- Fifty-five years or older
- Financially qualified
- Interested in bettering their current employment circumstances

Thus, the VR counselor should explore working with a local SCSEP program office in helping their mature clients get trained and placed. In addition to AARP, "there are 73 other SCSEP program grantees. Grant awards are made to 18 national nonprofit organizations (AARP Foundation, Asociacion Nacional Pro Personas Mayores, Easter Seals, Experience Works, Goodwill Industries International, Institute for Indian Development, Mature Services, National Able Network, National Asian Pacific Center on Aging, National Caucus and Center on Black Aged, National Council on the Aging, National Indian Council on Aging, National Urban League, Quality Career Services, Senior Service America, SER-Jobs

for Progress National, Vermont Associates for Training & Development, The Workplace) and 56 units of state and territorial governments." (U.S. Department of Labor Employment & Training Administration)

Another effective way to engage the employer community is to create an advisory board consisting of employers, community organizations, and perhaps an organization connected to the public workforce system, e.g., State or local workforce investment board. The advisory board can assist the VR staff in providing information on current hiring trends and changes in the labor market. "In addition, the board can assist on critiquing resumes, conducting mock interviews provide information about job openings and new business start-ups, and can pave the way for employer based training and collaborations." (International Association of Jewish Vocational Services, 2006.)

Promising Employer Practices:

As stated earlier, not all employers have begun or are now just beginning to address their talent needs in relationship to their strategic plans and the changing demographics of the workplace (Towers Perrin, 2006). However, there are many organizations that are "ahead of the curve" and recognize the valuable contributions of mature workers. They have implemented policies and practices that are conducive to attracting and retaining a mature workforce.

Each year, many of these employers are recognized by AARP as Best Employers for Workers Over 50+. Employers submit a comprehensive application and are rated on the following areas:

- recruiting practices,
- opportunities for training, education, and career development;
- workplace accommodations;
- alternative work options, such as flexible scheduling, job sharing, and phased retirement;
- employee health and pension benefits; and
- retiree benefits

Employers selected as Best Employers for Workers Over 50 in 2007 spanned numerous industries and incorporated many policies and practices

that VR counselors can promote as they interact with employers and prepare their clients for employment. The following paragraphs describe some of the employers highlighted.

SC Johnson and Company:

SC Johnson and Company is a consumer products company that makes products like Shout®, Windex®, Mr. Muscle®, Ziploc®, Edge®, Glade®, Brise®, Vanish®, Raid®, OFF!®, Kabbikiller®, Pledge®, and Scrubbing Bubbles® (SC Johnson Company, www.scjohnson.com).

SC Johnson offers extensive benefits and work life programs to its employees, including paid sabbatical leave, flexible work hours, part time and job sharing, summer hours, holiday shut down in December, mentoring up program, officer job shadowing, international assignments, maternity/paternity/adoption leave, childcare learning center, summer day camp, and childcare tuition assistance. Other highlighted practices include:

Benefits/Alternative Work Arrangements: Full- and part-time employees can select from alternative work arrangements, such as flex time, compressed work schedules, job sharing, and telecommuting. Full-time employees are eligible to move to part-time work on a permanent or temporary basis.

Benefits/Health: Full- and part-time employees (working 20+ hrs/week) receive individual and family medical coverage, individual and family prescription drug coverage, individual and family vision and dental insurance, individual and family long-term care insurance, as well as short- and long-term disability, EAP services and life insurance. SC Johnson also offers dollars for health care premiums and HSA and FSA accounts to assist employees with out-of-pocket healthcare costs. Health benefits for retirees pre-65 and 65+ include individual as well as spouse medical and drug coverage, dental and vision insurance, long-term care insurance, EAP services, as well as life insurance or other death benefit coverage.” Workforce: 35 % of SC Johnson employees are 50+.

First Horizon National Corporation:

With more than 12,000 employees located in more than 40 states, First Horizon National Corporation (FHN) provides financial services through hundreds of offices. (About First Horizon National Corporation, First Horizon.com).

First Horizon National Corporation offers flexible work options such as prime-time employee status (employees with at least one year of service reduce work hours to 20-32 hrs/week and maintain full benefits), formal flex-time (employee can shift work hours), informal flex-time (employee makes up time on own schedule), and telecommuting/flex-place (employee works at home or other location). Employees, retirees, and their families also benefit from Mayo Clinic resources at no cost, including a 24-hour nurse line, Tobacco Quitline, the “Mayo Clinic Guide to Self-Care” book, and Mayo Clinic EmbodyHealth newsletter.

Recruiting: First Horizon uses senior placement agencies to target mature workers and retirees.

Benefits/Alternative Work Arrangements: The company offers flex-time, compressed work schedules, job sharing, telecommuting, and a formal phased retirement program. The phased retirement program allows employees with at least one year of service to reduce their work hours to 20-32 hrs/week (called prime-time) and maintain full-time benefits. Full-time employees are eligible to move to prime- or part-time work on a permanent or temporary basis.

Benefits/Health: Full- and prime-time employees (working 20+ hrs/week) receive individual and family medical coverage, individual and family prescription drug coverage, individual and family vision and dental insurance, and short- and long-term disability. Individual and family long-term care insurance is also offered to all employees with no minimum weekly work requirement. Health benefits for retirees pre-65 and 65+ include individual and spouse medical and drug coverage, long-term care insurance, EAP services, and life insurance or other death benefit coverage. Age of Workforce: Twenty-three % of First Horizon employees are age 50+. The average tenure of employees age 50+ is 10.8 years. (AARP, Employer Resource Center).

YMCA of Greater Rochester

The YMCA of Greater Rochester offers flexible work options such as job sharing, part-time professional positions, and flexible work schedules to assist employees with balancing work and family life. The YMCA’s “Walk the Talk” initiative encourages employees to walk a minimum of 10,000 steps daily and participate in complimentary fitness classes. The YMCA distributes free pedometers, offers an online tracking tool to monitor progress, and awards bonus steps for eating healthy food choices.

Recruiting: The YMCA of Greater Rochester uses senior placement agencies to target mature workers and retirees. The YMCA has a partnership agreement with Lifespan, which provides information, guidance, and services to assist the mature population. The organization participates in recruiting events at the Veterans Outreach Center and also at the Rochester Area Employee Network, which recruits individuals age 50+ with disabilities.

Benefits/Health: Full- and part-time employees (working 25+ hrs/week) receive individual and family medical coverage, individual and family prescription drug coverage, individual and family vision and dental insurance, individual and family long-term care insurance and short-term disability. Long-term disability is also offered to full-time employees. Health benefits for retirees pre-65 and 65+ include individual as well as spouse medical and drug coverage, vision and dental insurance, as well as life insurance or other death benefit coverage. Retirees 65+ also receive individual and spouse long-term care insurance and EAP services.

Workplace Culture/Continued Opportunities: Full- and part-time employees are offered many learning and development programs: tuition reimbursement, in-house classroom training, on-line training, and certification classes. A Workforce Investment Act Training Grant of \$70,000 is also offered with 46 % of employees using it in the past 12 months.

Benefits/Alternative Work Arrangements: Full- and part-time employees can choose from a range of alternative work arrangements: flex time, compressed work schedules, job sharing, telecommuting, and a formal phased retirement program. The phased retirement program gives employees the opportunity to phase down their work expectations without jeopardizing their retirement payout. Full-time employees are eligible to move to part-time work on a permanent or temporary basis. The age of their Workforce: 16 % of the YMCA employees are 50+. The average tenure of employees age 50+ is 10 years. (AARP, Employer Resource Center)

VR agencies across the country have worked with these business and others to help them hire and retain qualified older workers with disabilities.

The South Carolina VR agency has had their “Job Retention Services” (JRS) program for business customers for over 10 years. It is a modified version of an Employee Assistance Program (EAP). The JRS program focuses on direct intervention with an employee and a business to deal with job retention issues tied to disability. Sometimes the VR counselor

is on-site with their business account, and sometimes (on employee self-referrals to the JRS program) business is done off-site and confidentially, just like an EAP.

The “RAVE” program (Retaining a Valued Employee) in Alabama was modeled after the SC JRS program, with some differences. It focuses on meeting the needs of business when an employee’s job is affected by illness, injury or disability. RAVE is based on an early intervention model for individuals who are eligible to access VR services. It has been in place in Alabama VR for about 6 years now and is very popular with their lead business accounts like Alabama Power and the University of Alabama at Birmingham, as well as with a wide variety of smaller businesses.

In North Dakota, VR has a business consulting model. It is called “Rehabilitation Consulting & Services” or RCS. The agency describes it as a “full service business assistance program for North Dakota business owners and employers.” The goal of the program is to help employers find solutions to disability-related issues that support the hiring and retention of employees with disabilities, including the aging workforce. The North Dakota RCS program works closely with the Rocky Mountain Disability & Business Technical Assistance Center is providing these supports to employers.

The Walgreens – VR Story

Walgreens, an AARP National Employer team member that is committed to hiring mature workers is also very active in hiring people with disabilities. Walgreens is the nation’s largest drug store chain. The company has over 5,500 retail stores in 46 states and in Puerto Rico. Walgreens also has 15 distribution centers in 12 states that supply the product for the retail operations; this includes filling and mailing of customer prescriptions.

The relationship between VR and the Walgreens logistics and distribution center team began in Anderson, South Carolina. Walgreens senior vice president of distribution and logistics, Randy Lewis, was looking at sites to build a new distribution center. His goal was to build a distribution center that was “universally accessible” to a variety of workers, including employees with disabilities. Randy and his team connected with the South Carolina VR program through the economic development council. With an understanding of Walgreens goals and business needs, VR staff helped build a team of 13 local agencies that provided the resources and support services needed to build an accessible distribution center. Access was addressed through a variety of perspectives, which included but are not

limited to the architectural design of the physical plant, added features like ramps, electric doors and flashing lights added to the sound driven warning systems, accessible software and computer systems, and the accessible website for individuals to apply and learn more about employment opportunities at Walgreens. At the Anderson, S.C., distribution center more than 40 percent of the 700 workers here are disabled. What has been the impact on the overall performance? The distribution center has had increased production and a decrease in the error rate for shipping products.

What drives Lewis' passion to create a universally accessible workplace? He has a son with autism and knows first-hand the challenges of everyday life for people with disabilities. He envisions a future where Walgreens employs the talents of all people because their accessible workplace supports the employment and top performance of all employees. He is also working hard to share this approach and make Walgreens a model for other employers.

The company has worked with VR and a variety of agencies to proactively reach out to the disability community for recruitment. "We know this requires more than a 'build it and they will come' attitude to be successful," said Randy Lewis. "Our local partners and statewide officials have worked tirelessly in setting up a support network to make this outreach with the disability community a success," said Lewis.

VR is currently working with Walgreens to open a new distribution center in Connecticut in 2009. In addition to CT and SC, VR is also working in with the Walgreens distribution centers in: AZ, CA, FL, GA, IL, IN, MN, OH, PA, TX, WI, and Puerto Rico. In these states the distribution centers were already in operation and accessibility is addressed through a "retrofit" approach. Though there is not the same level of access as the newly built facilities, Walgreen, VR and community partners are working to increase the access, train, hire and retain employees with disabilities. Lewis has the goal of hiring 1,000 employees with disabilities in the distribution side of Walgreens operations by the year 2010.

The above examples of promising practices by employers illustrate how employers are responding to the changing demographics of the workplace by making their policies and practices conducive to recruiting and retaining mature workers. Successful placement of mature workers with disabilities will likely generate a similar response from employers as the myths associated with mature workers are similar to those of workers with disabilities. The qualities that disabled workers bring mirror those

that mature workers bring to an employer. Thus, these promising practices will benefit mature employees with disabilities as well. (Kaufman, 2007) "By integrating technology, processes and supports to help people with disabilities in the workplace, companies help maturing workers remain effective and productive despite common age-related disabilities like vision, mobility and hearing loss." (Kaufman, 2007, page 4).

Self Study Questions—Chapter 3

1. In this chapter, talent is defined as
 - a. A euphemism for the workforce in general.
 - b. The total of an individual's innate abilities—from technical skills to soft skills such as judgment and experience.
 - c. The ability to compete in a dynamic global environment.
 - d. What businesses need in order to meet short- and long-term goals.
2. Talent management is
 - a. A strategic approach to attract, develop, retain and use employees with the necessary skills and aptitude to meet a business's current and future needs.
 - b. Includes planning and marketing to potential employees with needed skills.
 - c. Includes disability management.
 - d. All of the above.
3. Practices that some model employers have adopted in order to attract and retain a mature workforce
 - a. Are practices that promote a healthy family-work balance.
 - b. Include flex-time, part-time professional positions, telecommuting.
 - c. Are expensive for businesses to develop.
 - d. Both a and b.
4. Four steps in a demand-side model which VR agencies can use to ensure they are employer-focused are
 - a. Establish a relationship, create a network, provide expert services and build on employer and community partnerships.
 - b. Move accountability to management, make productivity the critical measure of success, incorporate talent management concepts, put into place job arrangements that appeal to older workers.
 - c. Appeal to employers' sense of community in hiring older workers with disabilities, hire employees with business backgrounds, redefine successful closures, reduce bureaucracy.
 - d. None of the above.
5. T/F VR counselors can encourage employers to view them as consultants and resources by providing services generically to employers, not just to support the placement of a specific consumer.
6. T/F South Carolina Vocational Rehabilitation Department's Job Retention Services (JRS) program helps businesses deal with job retention issues related to disability.
7. T/F Creating an advisory board of employers, community organizations, the workforce investment board and others is an effective way for VR agencies to build relationships with the community.
8. T/F The Walgreen's story illustrates how employers are making their policies and practices more conducive to recruiting and retaining mature workers and workers with disabilities.

Chapter 4

Strategies for VR Service Delivery to Mature Workers

You need to know that:

VR counselors already have the skills to assist mature workers with disabilities

Older people's circumstances are not prohibitive of their employment.

VR counselors and agencies will benefit by establishing collaborative relationships with other agencies that serve older workers.

Older workers will require flexibility in their work environments.

The initial interview with the older consumer can focus on their work and life history and the skills they have developed.

The skills that older workers have developed over a life time can be transferable to new situations.

Few evaluation instruments have norms for the older population.

Slower response may give inaccurate results on various evaluations.

Timed testing may not be appropriate for older workers.

Past and current performance is a good predictor of future performance.

Performance can be enhanced by small changes, such as improved lighting or sound proofing.

Older workers may need post-employment services due to progressive nature of disabilities and acquisition of new disabilities among the older population.

“The population of the United States is aging, and with this change will come new opportunities and new challenges for rehabilitation counselors” (Swett & Bishop, 2003, p. 13). Mature persons have a lifetime of experiences to draw upon for employment and have developed skills, behaviors and competencies that make them an asset on the job and in the community. However, many of these mature workers face disability-related barriers/needs that often cause them to stop working. VRCs and other service providers and educators will need to understand the barriers and biases which have a negative impact on the service delivery for the mature consumers (Kampfe, Harley, Wadsworth, & Smith, 2007).

This chapter will provide suggestions to assist the VRC and other professionals in developing strategies for assisting mature consumers with disabilities through the VR process: referral, initial interview, evaluation and assessment, individual plan for employment/service planning, placement, closure and post employment services. Understanding mature workers, their life experiences and the barriers they face will help to assist this population cohort to move beyond barriers that prevent them from reentering the workforce or remaining on the job.

As a group, aging workers possess significant differences and life experiences that are not universal. According to Dixon, Richard & Rollins (2003, p.5), “The elderly of today and those of tomorrow constitute significantly different cohort groups.” As such, older persons will have different perspectives on issues which can directly impact the development of appropriate services.

VRCs and other service providers should be aware of the differences within each cohort. These variations range from experiencing the Great Depression, World War II, the conflicts of the 60s and the Civil Rights Movement (Dixon, Richard & Rollins, 2003). The differences within the cohorts and their individual perceptions, cultural beliefs and views of the world can affect their ability to cope with their disability and have confidence to move forward with employment. “Additionally, different

cultures mark entrance into older age through social changes such as becoming grandparents, retirement, or functional status, rather than chronological age.” (Larkin, Alston, Middleton, & Wilson, 2003).

Another type of barrier for the mature workers is ageism. According to Larkin, Alston, Middleton, & Wilson, (2003), “This phenomenon is similar in nature to racism, sexism, disabilityism, and other-isms.” Mature workers who experience ageism could be denied employment or promotions or just not given the opportunity in work situations due to age. As such, VRCs and other service delivery professionals should be aware of both the mature worker’s perceptions of their skills levels, their beliefs or value systems and the biases of others based on age alone.

As outlined in the previous chapters, application of VR counseling skills can help to open, maintain and enhance work options for mature workers. Quality services and outcomes depend on the establishment of effective partnerships between the counselor and those seeking services. The counseling approach used in VR is well designed for mature workers. Mature workers may benefit from: (1) emphasis on the consumers as expert about their own life; (2) respect for and incorporation of the consumer’s right to choose and make decisions that affect them; (3) the VRC as a professional with relevant expertise to act as an ally and supporter; (4) the practical focus on resources, accommodations, services and supports to address needs; and (5) the ongoing plan adjustments to ensure success as action steps are implemented.

When mature consumers apply to VR for services, they have typically exhausted their own efforts. They may be convinced that nothing can help to reduce the barriers they face. It is important for VRCs to guard against discouragement and attend to the mature persons’ strengths and assets. Lands (1997) noted that counselors for older adults need to believe that people can make changes at any age and that an older adult’s life circumstances should be considered but do not prevent that person from taking action and succeeding.

Referral

Although mature workers have desired qualities for employment, historically, the referrals are low or non-existent. According to Dixon, Richard & Rollins (2003), one explanation for this is that rehabilitation services are tied to employment outcomes, and most aging and elderly persons are assumed to be retired or approaching retirement and, therefore ineligible for services. VRCs and other service providers

will need to provide outreach to agencies to inform and educate the communities in general about the powerful resource hiring mature workers will bring to businesses.

Collaboration among VR, community organizations and agencies may guard against organizational barriers in service provisions, and significantly contribute to the goals of employment, and social well being for the mature consumers (Harley, Donnell, & Rainey, 2003). Growing older in a changing, technological society creates demands on many older individuals who are not prepared to meet those demands (Harley et al.).

There are many biological changes that come with age, or senescence, as discussed in Chapter One, and can result in disabilities which can create problems on the job. For example, age-related changes in eyesight changes vision control and a person working with quality control management may begin to have difficulty noticing slight deviations in a product, or someone who works on computers may begin to notice fatigue, eye strain and headaches. Such difficulties can affect work performance, quality, or perceived competence, and can thus threaten work tenure. The individuals may not recognize that performance can be enhanced with small changes such as better lighting and/or enlarged font.

Other mature persons may experience functional limitations as a result of cumulative stress effects, such as noise exposure damage to hearing or repetitive motion injuries that accumulate over many years. Still other mature persons may experience limitations secondary to chronic health conditions and lifestyle interactions, such as arthritis, obesity, high blood pressure, and diabetes (Kampfe et al., 2007). As the research in Chapter 2 suggested, mature persons often attribute functional limits to aging, or to a specific medical condition, rather than to the disability. Since aging is a natural and inevitable process, and health conditions are under the control of a doctor, often it is assumed that the person must just learn to live with limitations. Part of this is due to the retirement age established by Social Security Administration (Harley, Donnell, & Rainey, 2003).

Harley, Donnell, & Rainey (2003) reported, “the number of social concerns (e.g. financial, loss of marriage/life partner, lack of access to affordable health care and employment concerns) confronting individuals as they age, demonstrates a compelling need for collaboration among VR counselors, social workers, and mental health practitioners.” VRCs or other service providers may need to play key roles as advocates to generate collaborative partnerships assisting mature

consumers prior to applying for VR services. Before a referral system can be established, VRCs may need to provide outreach to communities and build relationships that will benefit the mature consumers. As the previous chapters have discussed, mature workers will require some form of flexibility in the work settings. All community partners and businesses must be willing to make adjustments within their respective HR policies to accommodate the many challenges mature workers may face in working beyond the standard retirement age. Harley, Donnell, & Rainey (2003) report mature workers may have several areas requiring support, such as mental health, housing, food, income and, of course, employment. For many mature consumers, VRCs may be addressing many of the above stated issues during the course of VR services. If VR agencies worked and collaborated with other human service professionals, the potential benefits for the mature workers would certainly increase.

Initial Interview

Assessing transferable skills

The in-depth interview is the first contact with mature consumers and should have the greatest impact on the direction of future services. Analyzing the consumers’ work history for transferable skills could potentially provide information on learning patterns, skills, abilities and interests. When meeting with mature consumers, it is important to build consistent rapport as mature individuals with disabilities have lower self-confidence and lack belief in their own abilities for competitive employment. Utilizing work history analysis should be the main focus for the interviews since most mature consumers will have a well-developed work history (Kampfe et al., 2007). For those individuals who do not have a work history, there will be years of transferable skills to consider, including child rearing and volunteer work, etc. Additionally, the VRCs will need to assess the consumers’ age-related disabilities and look for common changes for sensory and physical limitations that the consumers may not fully understand or realize.

Mature consumers may have altered perceptions of their disability as age related changes can be acquired slowly and mature workers accommodate for the changes without fully understanding the disability. For example, older individuals who have acquired hearing loss over time may miss social clues and can experience greater social isolation as a result.

The following tables incorporate techniques and questions that will apply to mature consumers. These questions should assist VRCs and other service providers in tailoring the initial interview. Focus areas include disability-related factors which are specific to returning to work and medical issues that may arise during the course of the VR process; financial factors which will help establish mature consumers' stability and immediate needs for placement; independent living factors to identify additional resources necessary; agency factors which will establish possible collaborations with other agencies; and work-experience factors which will demonstrate abilities and skills.

Disability-Related Factors

Table I

- Does the individual have a medical release to work?
- What are the medical/work restrictions?
- Does the mature consumer have difficulties adjusting to onset of disabilities and restrictions?
- Is there a realistic understanding of abilities and limitations?
- Is the consumer getting appropriate routine health care?
- What accommodations are needed for medical care/treatment?
- Are there mobility problems that will interfere with obtaining a job?
- Is the current condition progressive?
- Does the consumer qualify for durable medical supplies from Medicare?
- What type of medication does the individual currently take, have dosages stabilized and are there side effects that create the need for additional accommodations?
- How does stamina affect performance?
- Has the consumer made any attempts to accommodate late-onset disabilities?

Financial Factors

Table II

- Does the consumer receive Social Security benefits?
- What is the financial situation, and how will that impact future employment and benefits such as Social Security?
- Does the individual have health care, and how much does he/she pay for benefits?

Daily Living Factors

Table III

- Does the individual have reliable transportation or access to public transportation?
- Is there adequate or stable housing?
- Is the individual the primary care giver to aging parents or to a spouse or child with a disability?
- Can the consumer meet daily living needs?

Agency Factors

Table IV

- Is the consumer working with other agencies, such as Department of Aging or Veterans Administration?
- Does the consumer have a Ticket to Work from the Social Security Administration?
- Is the consumer aware of work incentives?
- Did the consumer have a work-related injury and receive Worker's Compensation Benefits?

Work Experience and Education Factors

Table V

- Did the consumer work in the same or similar capacity for most of his/her life?
- Are there many different career paths?
- Did the consumer have specialized training or education?
- Did the consumer have skills from military experience, leadership positions in organizations, community activities or volunteer experiences?
- Is the consumer computer literate?
- How long has the consumer been out of the workforce?
- What is currently creating problems on the job?
- What are the work patterns for transferable skills analysis?
- Are there obvious strengths from the work history?
- Can the consumer identify and describe these strengths?
- Can the consumer identify jobs or employers where these strengths might be utilized?

Evaluation and Assessments

The preceding chapters have discussed the nature of mature workers, including the changes associated with cognition, processing speed, coping abilities and various assessments that would be considered appropriate to measure and identify strengths and weaknesses for mature consumers. Standardized instruments capture elements based on normative data. Aging is a developmental stage with certain traits and characteristics that are unique to each individual regardless of how similar to others that person may appear. The complexity of physical and mental disabilities and function, psychosocial factors, the importance of social supports and engagement and the interactive effects of physical and emotional/psychological stressors, make assessments critical for effective planning with mature persons (Larkin, Alston, Middleton & Wilson, 2003). Unique

assessment experience and expertise make VRCs a powerful asset for improved work and life outcomes for mature persons.

Measurements

While this document does not attempt to cover in detail all types of assessments-such as neuropsychological assessment for mature consumers with traumatic brain injuries- the following discussion does attempt to provide some insight into how VRCs and other service providers can accommodate mature consumers during the evaluation phase. Kampfe et al. (2007) report assessments require different considerations for mature/older persons. When choosing assessments or considering accommodations, it is important to utilize appropriate instruments that are standardized for older populations. Normative testing is not available for some age cohorts beyond 60 or 65 (Kampfe et al., 2005).

The test, the individual and the environment can alter accurate results. Consider the individual and the appropriate setting when conducting assessments. If the person has limited exposure or lacks confidence in the use of computers, computerized assessment should be avoided. To reduce anxiety that can inhibit performance for mature persons, the person should be advised of the purpose of assessment, what specific things the assessment will measure and how such information can assist in reaching the goal. When a speed test is used, small changes can allow the test to also function as a power or optimal performance test (Kampfe et al., 2005). Note results when the timed test was to end, but then encourage the person to continue to work to get a picture of the person's capacity if speed were not a factor. Slower processing speed and reaction time are reduced when mature persons complete familiar tasks; so timed tasks may need to be repeated for accurate results.

Conditions in the environment, poor lighting or too many distractions are a few of the elements that could interfere with accurate assessment results for older persons. Additionally, physical differences due to the aging process or disability that are not clearly identified during the initial interview, such as loss of hearing, visual changes, fatigue, pain, depression, anxiety, and residuals of medication, may also cause inaccurate results (Kampfe et al., 2005).

Many traditional testing instruments contain time segments and require quick memory recall or require the person to complete multiple complex tasks in a short period of time. The mature consumer will probably have slower reaction times and overall lower scores which may not be a true

measurement of the individual's ability (Kampfe et al., 2005). The mature consumer has years of data to retrieve and sort, which on tests that emphasize speed over power could be perceived by the test administrator as a deficit (Kampfe et al., 2005).

Differential results for an older population are not always a sign of cognitive defects, slow learning or an inability to problem solve. Individuals who have hearing loss may experience difficulties fully understanding oral instructions or questions (Kampfe, 2008). Hearing loss can have a multitude of residuals effects that can either hinder productivity on the job or can cause a health professional to misdiagnose an individual (Kampfe, 2008).

Functional Capacity Assessment and Work Hardening- Maximizing Assessment Results

If mature consumers experience late-onset disabilities, or have a combination of conditions that create limitations, they may not be aware of which activities are safe and which should be avoided. Sometimes just having concrete information about physical capacities is sufficient to allow mature consumers to continue on the job or to seek accommodations to continue to work. Physical capacity and stamina can also have very powerful effects on performance observed in other assessments. It may be necessary to get physical capacity evaluations before any other planning begins to ensure that work opportunities are not unnecessarily limited. If mature consumers have been inactive for extended periods, work hardening to increase stamina and work capacity may also be needed before other career planning or placement services are offered.

Situational Assessment – Finding the right job

Memory and problem solving for mature persons are enhanced when contextual cues are present. As a result, paper-pencil testing may not be the best reflection of skills or potential. Past or current performance may be better indicators of future behavior and can be assessed either by behavioral interviewing as in transferable skills assessment or by observing current performance in situational assessments (Kampfe et al., 2005).

The situational assessment is effective for observing skills with mature individuals who do not have a work history or for those who are reentering the workforce for various reasons. The situational assessment provides an opportunity for mature consumers to work in employment settings and demonstrate abilities in less stressful environments and may be more relevant to older workers (Kampfe, et al., 2005).

Individual Plan for Employment (IPE)

Service Planning

For VRCs, the challenge and opportunity of reaching mature consumers require provision of services that immediately expand options. Employment is significant in increasing the independence and quality of life for people with disabilities. The choice of employment goals and selection of appropriate rehabilitation services to meet these goals are critical to achieving successful employment.

An analysis of mature VR consumers age 65 and older found that 80% identified competitive work as the reason they came to VR. Additionally, some mature workers put more value on exploring transferable skills and identifying abilities, preferences, functional capacities and limitations rather than spending time on choosing a new career path (Kampfe et al., 2005). Work arrangements such as part-time, job sharing, or reduced hours or days of work may increase opportunities for mature workers to remain on the job longer or help ease into retirement. While older adults will have gained judgment and maturity through their career experience, they will need help in understanding and navigating the new career environment. (Herr, Cramer & Niles, 2004)

Planning is just as important to mature workers as it is to younger consumers applying for VR services. As reported in preceding chapters, the life span is increasing and the aging population in general is living longer. The IPE can be a powerful tool to assist in goal attainment and expanded work options for mature consumers. The following is a list of considerations that will assist VRCs with the IPE process.

IPE Focus

- Transferable skills analysis
- Identifying functional capacities
- Identifying training options that build on what mature workers know and enhance specific skills valued by employers
- Work arrangements/flexible schedules
- Employer assistance and collaboration to retain the skills and contributions of maturing workers
- Assistive technology
- Adapting the work place
- Having realistic work expectations that reflect the mature worker's preferences

According to Finch & Robinson (2003), "aging with a disability has been described as one of the most important new developments in rehabilitation." VRCs will need to consider and respond to the changing needs of mature consumers especially when working in the plan development stage of the VR process. Finch & Robinson (2003) report later-in-life disabilities and other important life domain issues will require significant life adjustments that VRCs, other service providers and educators will need to consider while assisting mature consumers with VR services:

- Psychosocial adaptation to disability involves complex interactions between personal, social, and environmental factors.
- Practitioners will need to use a variety of approaches to teach adaptive coping skills and help mature consumers work through perceptions of loss.
- Assist in modification or removal of environmental barriers

- Adjustment to disability for persons with late-onset occurrence can be challenging because of their pre-disability lifestyle and level of functioning.
- The occurrence of a disability can potentially disrupt many of the previously manageable aspects of their life, such as employment, relationships, and economic independence and lead to feelings of frustration and despair.
- Their values tend to be more stable and entrenched and can present challenges to adapting to changes.
- Successful adjustment requires a level of value examination, a reshaping of values and goals, and implementation of coping strategies
- Face the dual challenge of adjusting to both their disability and aspects of growing older with the accompanying physical and role changes

As outlined above, there are certain challenges facing the mature workers. They will need to accept the newly acquired disability as an age-related process and work to manage their independent living needs (Finch & Robinson, 2003). VRCs will need to understand the aging process and to recognize the myths associated with older workers in order to assist consumers with appropriate plans and accommodations.

Some mature workers may have difficult adjustments to acquired disability, experiencing loss of their "pre-disability lifestyle and level of functioning," (Dixon, Richard & Rollings, 2003). VRCs and other service providers will need to make adjustments in current VR practices to assure appropriate services are provided. Finch & Robinson (2003) noted mature consumers need encouragement and reassurance throughout the VR process but especially with the implementation of the IPE, which could involve training and job development.

As the changing economy advances with technology, many mature consumers will need assistance with training to upgrade or learn new skills that will apply to today's markets (Dixon, Richard & Rollings, 2003). Additionally, mature workers may require assistive technology as the functional limitations become greater with aging (Kampfe et al., 2007). These limitations impact the ability of aging workers to perform the essential functions of the job. Kampfe et al. (2007) reported the incidence level of hearing and visual limitations increases dramatically

for individuals who are 55 and older and can create additional residual effects with job production and social interactions both on and off the work site.

VRCs may need to include retirement into individualized planning for all workers with disabilities since aging-associated limitations occur 15-20 years early for this group (Sheets, 2005). Financial and benefit coordination planning could increase options for workers with disabilities later (Dixon, Richard & Rollins, 2003) and should be initiated as early as the late 30s or 40s. Employer experiences with workers nearing retirement confirm the importance of proactive discussion and planning. Managers report that often when they discuss making changes to retain such employees, the person has solidified retirement plans and is not open to change (Marquez, 2007). Spouses or partners should participate together in retirement planning (Dennis, 2007). Persons with disabilities often experience greater interdependence and need for daily life activity support so incorporating family in discussions takes on even greater importance (Hasnain, Sotnik & Gilhoni, 2003). Such planning can increase awareness of options and facilitate the couple's experience of choice and thus adaptation in retirement (Dennis, 2007). Planning services may prevent the negative outcomes that occur when retirees feel forced to retire (O'Brien, 2007).

Placement and Follow-up

Enhance Supports and Accommodations

As discussed, mature workers have a life-time of skills and abilities and most have had work experience at some point in their past. As such, mature workers have experience with job interviews and understand the importance of work ethics, appropriate dress and well-developed resumes. Some mature workers may have had professional or highly skilled backgrounds and should have the job placement activities tailored to meet those abilities (Finch & Robinson, 2003). Many of the established job preparation workshops may not be appropriate for mature workers with professional backgrounds.

Assistive technology and environmental accommodations will significantly improve the working environment for many mature workers with disabilities. Assistive technology becomes even more important with aging. Age-related functional limitations are likely and can impact job performance without some type of support. Access to technology typically focuses on computer hardware and software solutions, such as screen

reading software, screen and text magnifiers, speech recognition software, and screen access software, and can include other office equipment such as printers, faxes, and telecommunication equipment. Adapting the work environment encompasses a wide range of considerations, including ergonomics, lighting, heating, and noise. The American Society of Safety Engineers provides suggestions to increase safety in the workplace for mature consumers in a news release (October 30, 2007). These include ergonomic design solutions, assistive technology and other more general considerations.

Assessing the Work Site

- Improve illumination, add color contrast
- Eliminate heavy lifts, elevated work from ladders and long reaches
- Reduce static standing time
- Remove clutter from control panels and computer screens and use large video displays
- Reduce noise levels
- Utilize hands free volume adjustable telephone equipment
- Increase task rotation which will reduce the strain of repetitive motion
- Lower sound system pitches, such as on alarm systems, as they tend to be easier to hear
- Lengthen time requirements between steps in a task
- Increase the time allowed for making decisions
- Consider necessary reaction time when assigning older workers to tasks
- Provide opportunities for practice and time to develop task familiarity

Closure

Closure is not an event; it is a process. There are several factors to consider before closing a case regardless of whether or not the mature consumer was employed. It is important to provide information about similar benefits, services, agencies and resources the person can seek out if needed. Mature consumers will need information about managing health care related issues, including long-term health and functioning effects associated with specific disabilities. Also, mature consumers should have adequate information to continue to make informed choices when the VRC is no longer available.

Post-Employment Services

Vocational Rehabilitation needs do not always end once consumers are placed successfully on the job. Employers need to know they are not on their own once VR consumers are hired. In fact, this is a great opportunity to market VR services to businesses and expand partnerships. It is also important for consumers to understand the VR door is not closed once they accept positions. If VR is responsive to businesses, then those employers will be more open to hire additional VR consumers. Additionally, post employment services are interventions to assist with retention and create stability for consumers while on the job. Mature workers may need to utilize this VR service more than the younger VR consumers as sensory needs change or disabilities progress.

Conclusion

Throughout this IRI document, in-depth information has been provided regarding the aging workforce. The methods and suggestions provided in this section are intended to assist VR professionals in developing strategies for supporting mature consumers through the various steps of the VR process. The aging workforce is growing and has the potential to be one of the most vital forces of the US labor market during the next decade and beyond (Finch and Robinson, 2003). With this understanding, VRCs and other service providers will need to consider the unique needs of this population and provide the advocacy, accommodations and services that are consistent with their abilities, interest and skill level. The future labor market shortages create an opportunity for mature workers and all those who assist mature workers with disabilities to reach their employment goals.

Self Study Questions—Chapter 4

1. T/F VRC's do not need to spend as much time with transferable skills analysis for mature consumers since most of the work history will not apply to the current labor market.
2. What assessments are the most useful to use with the mature consumer for placement?
 - a) Situational Assessment
 - b) Career Interest Inventory
 - c) Transferable skills' analysis
 - d) All of the above
 - e) Both A & B
3. What are common barriers to assessments with mature consumers?
 - a) Attention
 - b) Fatigue
 - c) Poor lighting
 - d) Multiple complex task
 - e) All of the above
4. T/F The VRC should leave issues regarding health care benefits to the health care providers.
5. Which statement best describes ageism?
 - a) A preconceived idea that older is not better
 - b) Assuming maturing individuals cannot perform essential functions of the job after a certain age
 - c) Mature workers just want to nap
 - d) Mature workers cannot learn new tasks
 - e) All of the above

6. How will placement activities differ from traditional placement services?
 - a) Focus on functional resume with summaries of work history
 - b) Authorize Individual Service Provider to assist with placement
 - c) Advise on dress for success techniques
 - d) VRC will partner with mature friendly employers
 - e) Both A & D

7. What are the concerns for the VRC when working with consumers with late on-set disability?
 - a) Denial of disability
 - b) Becoming discouraged and giving up on the process
 - c) The nearest Starbucks location
 - d) Health care
 - e) All of the above

8. Which statement is a disability related factor as outline in chapter 4?
 - a) Does the mature worker have a realistic understating of abilities and limitations?
 - b) Does the consumer receive Social Security Benefits?
 - c) Does the consumer have specialized training?
 - d) Is the consumer working with other agencies?
 - e) All of the above

Chapter 5

Recommendations

Rehabilitation Professionals

1. *Recommendation:* Rehabilitation Professionals must consistently self-evaluate and then challenge and correct their own assumptions about aging and about the potential contributions of mature workers.

Rationale: As described in Chapter 2, mature workers experience ageism and discrimination that limits life and work outcomes (Dixon, Richard & Rollins, 2003). Few older persons apply for or receive VR services (Swett & Bishop, 2003). Rehabilitation professionals demonstrate some fear and information gaps related to older persons (Swett and Bishop, 2003). The law, VR policy and rules related to professional licensure and credentialing all require that professionals provide equitable and effective services.

Research has shown that as a group mature workers have better performance, high productivity, fewer work injuries, less turnover as well as more client and colleague networks. They often carry institutional memory and positioned expertise that cannot be taught or put into a younger worker training session, exhibit optimism, resilience, autonomy, adaptability, are willing to engage in relationships and projects, exhibit maturity, judgment,

work ethics, common sense and life experience, reliability, dependability, loyalty, ability to work independently and often varied work schedules, as well as an interest and ability to mentor and supervise younger workers (AARP, 2007; Borman & Henderson, 2001; Bruyere, et al., in press; Finch & Robinson, 2003; Human Capital Initiative, 1993; Mahoney & Restak, 1999; Piktalis & Morgan, 2003; Pitt-Catsouphes, et.al, 2007; Rix, 2001; Salthouse & Maurer, 1996, Smith, 1990; Sterns, & Miklos, 1995; Warr, 1994).)

2. *Recommendation:* Rehabilitation processes and approaches must be adapted to meet the diverse needs of mature and maturing workers. Examples of service delivery distinctions across this population include: providing orientation to disability and service delivery systems for persons with late onset disability, building on the person's accommodation and adaptation expertise for persons with life-long disability, addressing effects of systemic and individual discrimination for mature persons of color.

Rationale: As described in Chapters 2 and 4, outcomes depend on responses that are tailored around the cumulative effects of disability, and around the differences that occur with pre-vocational, mid-career and intermittent onset of disability (Beveridge, Craddock, Liesener, Stapleton and Hershenson, 2002). Most current older VR consumers experience onset within 5 years of application (Wadsworth & Kampfe, 2004). Persons aging with disability experience additional strains that often result in early retirement (Mitchell, Adkins & Kemp, 2006). Effects of discrimination tend to be cumulative and thus persons of color, women, and persons of minority backgrounds as a group experience restricted resources, choice and options in later life (Hasnain, Sotnik & Gilhoni, 2003; Kontosh, 2000).

3. *Recommendation:* Rehabilitation interventions must be timely, since interventions are most effective before maturing workers decide to leave the job. VR employer/employee collaboration to stabilize employment could be enhanced through employer contact and VR service marketing to Employee Assistance and Human Resources personnel. Marketing through organizations that typically serve mature populations such as AARP or Older Americans Act service providers may also increase timely access to VR services.

Rationale: As described in Chapter 2, disability often causes work exit (Markson, 2003). After retirement is announced, retention interventions are seldom effective (Marquez, 2007). Job loss could be prevented by early intervention with employers and workers. Effective employer consultation requires positive relationships that build confidence. Employers have little knowledge of VR services (Gilbride & Stensrud, 1993) or of VR involvement when workers with disabilities are hired (Gilbride, Stensrud, Ehlers, Evans & Peterson, 2000). Employee Assistance (EAP) and Human Resource (HR) personnel may become aware of emergent aging and disability needs that affect a worker's performance and job stability. HR and EAP staff may thus be an excellent source of contact for information about VR, available services, and for timely job interventions.

4. *Recommendation:* Work return services and supports must be provided to reflect the needs and desires of mature and maturing workers.

Rationale: Transferrable skill analysis is often needed since, as described in Chapter 1, 33% of workers change careers after age 51 (Johnson and Kawachi, 2007). Such workers have a lifetime of relevant work history but may require health and disability services, independent living assistance or job accommodations combined with an expedient return to work as described in Chapter 2. Mature workers often need computer skill training for job search or accommodation use (Finch & Robinson, 2003) and technology skill updates as described in Chapters 2 and 3 (Sweet, 2007; Charness, 2006; Yeatts, Folts & Knapp, 2000). Workers with disabilities displaced from industries that are downsized, or those who have aged into disability with recent functional limitation onset, may require more extensive re-careering assistance.

5. *Recommendation:* Service provision should incorporate a career development perspective that focuses on optimizing flexibility and later life work options.

Rationale: As described in Chapter 1, optimal pay and benefits are critical for some mature workers. Other attractive options include: work for as long as the person wants, time off for care-giving, control over work schedule, seasonal or part-time work (AARP, 2003). Others seek work from home, flex schedules, same employer but different summer and winter locations or the ability to move in and out of the job. More low-key, narrow job responsibilities

and consulting opportunities are also desirable (Center on Aging and Work/Workplace Flexibility, 2005; Pitt-Catsouphes, 2007). Rehabilitation professionals will need to expand beyond a focus on traditional entry-level employment to maximize consumer choice in later life.

6. *Recommendation:* Rehabilitation professionals must expand services considered and focus on health and independent living needs due to the complexity and inter-relatedness of health, work and life demands in later life.

Rationale: As described in Chapter 2, complexity of later life needs may require coordination and assistance with psychosocial and family adjustment, finances and benefits, housing, transportation, emotional support, community resources, healthcare as well as other needs (Doyle, Dixon & Moore, 2003; Finch & Robinson, 2003, Harley, Donnell & Rainey, 2003; Sheets, 2005).

7. *Recommendation:* To enhance later life options for all persons served by VR, rehabilitation professionals should ensure that by the time VR files are closed the consumer is fully aware of available similar benefits and services, post-employment processes and services, health maintenance strategies, retirement planning and the availability of the VR professional as a consultant to workers with disability and employers.

Rationale: Persons with disabilities experience challenges with maturing earlier and with greater complexity than the general population. This results in varied work barriers and coping efforts that ultimately overwhelm the person and result in early work withdrawal (Mitchell, Adkins and Kemp, 2006). Choice and options as the person with disabilities matures will be enhanced by proactive planning and awareness of resources and supports.

Rehabilitation Supervisors & Management

1. *Recommendation:* Efforts must be made to value, retain and support maturing VR staff so consumers profit from the life experience and years of service expertise of those staff. This may include management efforts to encourage experienced staff to stay on the job through the use of part-time work, expanded consultant roles, flex schedules, recruitment and re-employment of those who have retired or left the agency, more agency decision making

participation with tenure, as well as through annual employee development plans that include discussion of the needs, concerns and preferences of staff.

Rationale: As described in Chapter 4, mature VR staff members are crucial to create a welcoming environment and rehabilitation success for mature consumers (Swett & Bishop, 2003). Managers must be proactive and invest in maturing rehabilitation staff to retain them. As described in Chapter 1, mature workers desire worker friendly environments, where their opinions are valued and they have opportunity to learn new things, to have flexibility in schedules, as well as time to care for self or dependent health needs (AARP, 2003; Center on Aging and Work/Workplace Flexibility, 2005; Pitt-Catsouphes, 2007). Managers similarly have a role in assuring that accommodations and other supports identified as important for maturing workers are made available to VR staff with disabilities as they age.

2. *Recommendation:* Management must act to encourage service provision to mature and maturing workers with disabilities. Managers must also work with staff to identify related training needs, process or procedure barriers and system or service enhancements.

Rationale: Mature persons comprise only 4% of VR caseloads (Wadsworth and Kampfe, 2004). Maturing persons with disabilities retire 15 to 20 years earlier than persons without disabilities (Mitchell, Adkins & Kemp, 2006). Since this is currently an underserved population within VR, service experience is limited. To achieve best outcomes, VR staff will need support and the system will need to evolve with service provision.

3. *Recommendation:* Staff at all levels of VR and RSA must act to build partnerships so better outcomes are promoted for mature and maturing workers with disabilities.

Rationale: As described in Chapter 4, outside entities have little knowledge of VR, the services available, or of VR processes and outcomes. Even within VR there is not adequate recognition of the expertise and relevance of VR for this population, as evidenced by the very small percentage of seasoned workers served. Use this document to explain the VR fit with older workers to employers, policy makers, service organizations and the mature consumers themselves. Everyone in the agency must get in the act. Go with the three vowels: outreach, educate, advocate. Among groups to

be targeted: Social Security Administration, Older American Act partners, employers, advocacy groups, medical professionals, other service providers, consumers with disabilities.

VR Policy Makers

1. *Recommendation:* Program measures must be adapted consistent with mature worker informed choice that often includes goals of self-employment, part time and part year work.
Rationale: As explained in Chapter 2, mature workers with disabilities, similar to other VR consumers, want and need to work. A barrier is the historic emphasis on youth and benefit analysis used to demonstrate value within the VR system and program (Wadsworth, Smith & Kampfe, 2006). As a result, mature workers are underserved by VR (Harley, Donnell & Rainey, 2003) despite the 1973 expansion to include persons over age 65 (Wadsworth & Kampfe, 2004). Emphasis on cost benefit analysis in VR has been connected with devaluing mature persons based on anticipated years of contribution and related ageism (Hendricks, 2005).
2. *Recommendation:* Policies and procedures must be reviewed to ensure ease and timely service access for maturing workers with disabilities. This may include: (a) revision of outcome measures to value job retention equally with job placement, (b) examination of post-employment status and services so maturing workers have intermittent access to job retention services as they age, as well as (c) restructuring of job duties and tasks within VR so that staff can provide immediate and fully responsive job retention support.
Rationale: As explained in Chapter 4, intermittent VR services aimed at identifying changes in work environment, tasks or functions, combined with recommendations to promote better overall health and function, could help maturing workers with disabilities to remain on the job.
3. *Recommendation:* VR must establish relevance with mature workers who do not see themselves as “disabled.” A national initiative should be created to develop marketing materials and strategies that can be used by state VR programs to help mature workers connect limitations they experience to VR services. Outreach should occur with people already in the workplace as well as with those seeking to return to work. This audience may

be reached through collaborative efforts with AARP, Employee Assistance Program staff, Older American Act service providers as well as with medical providers.

Rationale: As described in Chapter 2, VRCs physical and cognitive difference expertise can better inform and stabilize mature workers on the job. Workers who connect functional limits with disability, rather than aging, request and get better job accommodations (McMullin & Shuey, 2006).

4. *Recommendation:* VR agencies must examine policies and practices to allow VRCs to act with immediacy and purpose when addressing the needs of mature workers.
Rationale: Are there steps in the process that can be eliminated to expedite services or does everyone that comes through the door have to go through each mandatory step of the VR process? In Chapters 2 and 4 we learned that employers say little can be done once people decide to retire and research shows that this happens much earlier, during the 40s, for persons with disabilities. Persons who have lived many years with disabilities and who are now aging, have tremendous coping and adapting experience. This is a group that epitomizes resilience, as well as active, effective problem solving. The VRC role is as a consultant with this population. Time is also of the essence for dislocated mature workers. Research shows that for mature workers, as time out of work increases, the likelihood of work return diminishes (O’Brien, 2007).
5. *Recommendation:* VR must embrace the spirit of the Rehabilitation Act of 1973 by becoming a model employer in providing support and resources for internal staff who are maturing with and into disabilities. This may include in-service education about the aging workforce leading to expertise throughout the agency. Supervisors would then have skills to actively and creatively support the efforts and employment of VRCs with disabilities and of those maturing into disabilities
Rationale: As described throughout, worker friendly environments are important to maturing and mature workers and compatible agency efforts communicate that workers are valued and prized within the agency. Resulting goodwill may have multiple benefits. More mature and maturing staff may stay on the job. Trained and retired staff may return to fill caseload vacancies. The agency

could thus create a pool of trained and qualified retirees to ensure continuity of service while offering greater flexibility so maturing staff have time to meet needs and stay on the job.

6. *Recommendation:* VR and RSA should demonstrate the value of an accessible workplace and work practices.

Rationale: There are three potential agency concerns when accommodating staff: (1) essential job functions must be performed, (2) services to consumers must be provided and (3) outcomes achieved. All three areas could be enhanced by investment in affirmative practices with maturing employees. This could be a powerful demonstration of the benefits of an accessible workplace as envisioned by Congress in 1973. Job performance of mature staff with disabilities would be enhanced because of personal life experience, maturing with a disability. Resulting insights and expertise could subsequently promote better outcomes throughout the agency. Services would also be enhanced due to staff continuity. The Rehabilitation Act has already established the added value of employing persons with disabilities (i.e. requisite Independent Living staff composition). Agency support for VR employees could help to ensure that VRCs and other staff do not opt out of work because of disability related barriers. As discussed in Chapter 4, efforts to retain mature agency staff could help alleviate critical personnel shortages and provide enhanced services to mature consumers served by the agency.

Pre-Service and In-Service Educators

1. *Recommendation:* Pre-service and in-service VR staff training must include adequate orientation to aging with disability, needs and potential of mature workers, effective strategies to enhance outcomes and work options in later life, as well as employer-focused techniques and tools for use when serving mature workers.

Rationale: As described in Chapters 1 and 4, the nation as a whole is aging, with 25% of American workers at retirement age by 2010 (Judy & D'Amico, 1997). Mature persons have the highest rates of disability (US Census Bureau, 2002). Most mature persons want and need to work (Stanford and Usita, 2002) but due to onset or exacerbation of disability barriers, employers will need assistance to engage and retain them (Mitchell, Adkins & Kemp, 2006).

2. *Recommendation:* Pre-service and in-service training must include rehabilitation professional examination of personal attitudes and bias related to aging as well as the contributions, strengths and preferences of mature workers. Additionally, education is needed specific to myths and assumptions espoused by others, the effects of age discrimination, steps to take when age discrimination occurs and intervention strategies to counteract ageism.

Rationale: As described in prior recommendations, attitudes and misinformation can result in discriminatory action by rehabilitation professionals. Chapter 2 points out that rehabilitation professionals also have ethical and legal obligations to assist persons to advocate and seek redress for discriminatory system practices and the actions of individuals within those systems. Remember the research from Chapter 4 that education creates lasting change in attitudes and bias. Responsive service requires responsive practitioners and policies. Education throughout the agency is key to make the system most accessible to mature and maturing persons. Trained VR personnel can then spread this training to employers, the workplace and throughout all service provision contacts.

3. *Recommendation:* Rehabilitation professional educational preparation must include information on the Age Discrimination in Employment Act (ADEA) as well as other relevant national and state laws that affect employment. Practicing rehabilitation professionals will also require updates and refreshers so that information is accurate and current.

Rationale: As described in Chapter 2, the VRC role of advocacy in service to mature workers cannot be overstated. Despite legal protections, work discrimination and ageism are common as demonstrated by exclusion, lack of promotion, demotion, harassment and job loss (Rosigno, Mong, Byron & Tester, 2007). VRC knowledge of employment (e.g. Fair Labor Standards Act), health (e.g. Family and Medical Leave Act) and disability laws and protections (e.g. ADA) are a critical part of the counseling process for all workers and apply to mature workers (Finch & Robinson, 2003). Mature workers do experience disability so VRCs should already be familiar with the Age Discrimination in Employment Act (Rosigno, Mong, Byron & Tester, 2007) and relevant state laws that protect older employees.

4. *Recommendation:* Rehabilitation professionals will require information about funded programs and services through the Older Americans Act, Social Security Ticket to Work and Work Incentives Improvement Act, as well as information to stay current with national efforts to consolidate aging and disability service provision.

Rationale: As described in Chapter 4, mature workers have complex needs (Chordas, 2007; Kelley, 2003; Mitchell, Adkins & Kemp, 2006). No single system can meet all needs, so collaboration across systems will allow continued function, enhanced outcomes, independence and positive quality of later life (Dutta, Perry, & Marme, 2007; Sheets, 2005). As described in Chapter 4, rehabilitation professionals need the expertise of professionals providing aging services, and aging population service providers need the disability expertise of rehabilitation providers (Sheets, 2005).

Rehabilitation Researchers

1. *Recommendation:* Research must be adapted to better track outcomes and evidenced based practices that lead to employment success for mature and maturing workers.

Rationale: As explained throughout, mature and maturing workers have been underserved within the VR system. As a result, there is a dearth of relevant VR specific research to guide practitioners.

2. *Recommendation:* Data must be collected to tap the range of benefits from enhanced VR services to mature or maturing workers. Related data must be collected so that such outcomes can be communicated and valued beyond the individual worker and VRC.

Rationale: As described in Chapter 4 and throughout this document, the potential benefits of VR services for mature workers are tremendous.

A very abbreviated list includes enhanced health, reduced social costs for institutional care as a result of ability to continue care-giving for dependent parents or children with disabilities, stabilization of staff and retention of essential worker skills within the workplace, enhanced relationships with employers, greater access to other community resources, improved mental health and coping competence, reduced medical costs as the person becomes more able to manage their own health care.

This document provides a potential starting point to target additional data that could be used to garner agency support and help guide the agency in the future. As more seasoned workers are served, additional data points should be identified by asking those experienced workers and the VRCs who serve them about benefits experienced.

3. *Recommendation:* Data should be gathered that better distinguishes the VR experiences and outcomes for the diverse populations of maturing workers. Analysis by various demographic and disability groupings is important and should minimally include identification of the experience of workers with disabilities during the 4th and 5th decades, as well as distinguishing between those VR consumers aging with disabilities and those experiencing later life onset of disability.

Rationale: The diversity of the population described throughout this document creates challenges in attempting to generalize findings for service enhancement. As described in Chapter 1, there is little information on the interaction between various aging factors and types of disabilities. There is also very little information on the effects of psychosocial interactions (e.g. work history, income, health care, lifestyle and support networks) as persons with disabilities mature.

4. *Recommendation:* Research result utilization and application will be facilitated through research that uses consistent definitions of the most VR relevant populations.

Rationale: As described in the Foreword to this document, a challenge repeatedly experienced by the IRI prime study group was definition of the population and language use when communicating about the population. Existing research and literature was often characterized more for topics and groups that were excluded, rather than for coverage of information about VR relevant mature and maturing worker needs and experiences.

5. *Recommendation:* Research should be conducted to collect and disseminate information about emergent innovative practices within states as more mature and maturing workers are served. This will allow states to benefit from and build on efforts occurring in other states. Likewise a collaborative internet-based site is needed so that states can share and review such information. This will

also ultimately allow all consumers to benefit from the VR system strength of nation-wide services that build on local resources and expertise.

Rationale: As described in Chapter 2, VR has the unique advantage of a system that can be individually tailored, but has nationwide replication potential. Mature and maturing persons with disabilities will get optimal benefit from VR financial and service investments, if data is collected to share strategies that enhance life and work outcomes across states and regions.

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