



Golden Years?

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Golden Years? Social Inequality in Later Life. *Deborah Carr.* New York, NY: Russell Sage Foundation, 2019.

With *Golden Years?* Deborah Carr provides a much-needed manuscript on the impact of inequality across the life course, particularly old age. Old age is bifurcated. Older people are the most diverse age group, and given growing inequality, they are perhaps the most unequal they have ever been. Recent tax law changes suggest they are likely to become even more unequal in the years ahead. Thus, it is important that we understand the impact of that inequality.

The overall story of *Golden Years?* is one of accumulating inequality. Across the life course, some people accrue advantages, opportunities, resources, experiences, income, and wealth while others accrue none of the above. Success breeds success, and adversity begets adversity. Most people fall somewhere in the middle; some older people may have a lot of money but poor health. Alternatively, they may have many friends but limited mobility. With age, accumulated inequalities are magnified, and they shape virtually every aspect of daily life.

The author pinpoints her question in the title. Will your golden years be golden? Her answer is that it depends. Those with more resources tend to bask in the glow, while those with the fewest resources tend to be left in the dark. Generally, poverty rates among the elderly are the lowest they have ever been and lower compared to other age groups. However, pockets of poverty persist; 20% of older black and Hispanic women who live alone are poor. Old-age income is unequally distributed, and wealth is even more so. By the time they are in their 60s, whites have over \$1 million more than blacks in average wealth. Inequality in old age is linked to a wide range of sociodemographic factors such as gender, race, class, education, marital status, place, health, living arrangements, and care work, and Carr attends to every one of them as thoroughly as possible.

I was invited to speak on a panel about Carr's book at the American Sociological Association meetings. In my presentation, I included what I considered the key sentence of the book. Incredibly, the speaker ahead of me did something similar, and we both presented the same sentence from page 8: "Old age intensifies the indignities of disadvantage, just as disadvantage amplifies the indignities of aging." Few authors can summarize the point of over 300 pages in just 15 words. Not in the book, but certainly implied, is the equivalent sentence: Old age intensifies the dignities of advantage, just as the dignities of advantage intensify the dignities of old age. Carr

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examines how people who have accumulated advantages across the life course tend to side-step, delay, or forgo many of the consequences of aging. Throughout the monograph, then, Carr meticulously demonstrates that people who have accumulated disadvantages over the life course tend to suffer the consequences of aging more fully and more severely while those who have accumulated advantages typically do not.

Chapter 1 provides an overview of how, for some old age is the best of times, while for others it is the worst of times. Which group you are in can be a matter of life or death. Men in the bottom 1% of the income distribution die 16 years earlier than men in the top 1%; women in the bottom 1% die 10 years earlier than women in the top 1%. Inequality, in general, and poverty in particular, can lead to premature aging and premature death. Carr makes it clear that the stakes are high.

Chapter 2 provides the snapshot of older Americans, emphasizing diversity in the ranks. Chapter 3 provides an overview of key sociological theories, emphasizing life course approaches to cumulative inequality. Then, chapters 4–8 explore, in turn, the links between inequality and physical health, mental health, social relationships, living arrangements, and planning for death. These chapters provide comprehensive overviews, critical reviews of the literature, and a constant drumbeat on the causes and consequences of inequality. Carr's reviews of the quantitative data are superb, and I think might be even more compelling if balanced with more attention to qualitative data. Sometimes, a single story can be as pivotal as reams of data.

Chapter 4, "The Fit and the Frail," reviews the biological theories of aging, the types of data scholars use to study morbidity and mortality, and the multitude of ways that SES becomes a fundamental cause for good and bad health in old age. Health behaviors matter: those with lower SES tend to have worse health behaviors but they also tend to have more adverse consequences for smoking, drinking, or obesity. Access to health care matters: those with lower SES tend to have less access to health care, but even when they do have health care they tend to receive less comprehensive care and have worse health outcomes. Ultimately, Carr demonstrates, those who have accumulated advantages across the life course tend to have better health and health care at every age, whereas those who have accumulated disadvantages tend to have higher rates of morbidity and mortality.

Chapter 5 analyses how inequality exacerbates depression, anxiety, substance abuse, stresses, and other mental health problems in old age. One intriguing example of a stressor with differential impacts in later life is ageism. While all older people may be subjected to some ageism, those who have accumulated advantages may find that they face relatively little ageism. One look at the board of directors for any symphony or opera, or at the faculty in most universities, reveals that among the more elite age and the wisdom associated with experience may be highly valued. By contrast, those who have accumulated disadvantages may find that they face relatively high amounts of ageism and that it begins at alarmingly young ages. For example, people working physically demanding jobs may be pushed out in their early 40s or 50s. Carr addresses a wide variety of coping mechanisms as well. Her bottom line is that those with more advantages are less likely to experience mental health problems, but when they do, they face them with many more resources and coping mechanisms at their disposal.

Chapter 6 explores social relationships in older ages and tackles issues such as widowhood, loneliness, needing care, providing care, caregiver strain, and elder abuse. Closely related, Chapter 7 analyses a wide variety of living arrangements and conditions for older people, including living independently, aging in place, age-segregated housing, multi-generation households, assisted living facilities, and nursing homes. In this chapter, Carr provides a much-needed assessment of how natural disasters and imprisonment intersect with old-age living arrangements to create very predictable sorts of hardship. In both chapters, Carr paints a similar picture. As they age, those who have accumulated more advantages tend to experience more of the positive and fewer of the negative impacts on social and residential well-being. They have more options and more resources with which to exercise their preferences for a meaningful, engaging, and safe old age.

In Chapter 8, Carr notes that even in death, poverty and inequality can bite. Those with more advantages are better able to prepare living wills and durable powers of attorney, organize inheritances, avoid the medicalization of death, and die a good death. They have more agency. They can orchestrate hospice, pain management, and final visits with loved ones. By contrast, those who have accumulated disadvantages are less likely to be able to get their affairs in order and more likely to die a solitary or painful death. Blacks, in particular, are likely to experience more pain and to be offered fewer pain relievers, even as they approach death. Carr makes it abundantly clear that those who have accumulated disadvantages across their life course often carry those disadvantages to their deaths.

Carr's attention to policy throughout the book and in the last chapter, in particular, is laudable. In addition to describing the history and mechanics of most of the major social spending programs, she demonstrates that social policies such as Social Security, Medicare, and Supplemental Security Income (SSI), and Medicaid reduce *economic inequality*. For example, without Social Security, the poverty rate among the elderly would rise from 10% to nearly 40%, disproportionately affecting older women, blacks, and Latinos who are less likely to have alternate sources of old-age income. She also shows that social spending programs reduce *health inequality*. For example, when SSI benefits increase, people report fewer functional limitations. Finally, she shows that these programs reduce *social inequality*. For example, when people who are food insecure rely on Supplemental Nutrition Assistance Program (SNAP) they report being less lonely or socially isolated. Together, these social programs truncate inequality. They provide a valuable safety net that ameliorates the consequences of a lifetime of accumulating disadvantages.

If space allowed, I would love to see her more fully address the question her own review of the literature begs: if social spending policies work, if they reduce inequality, why are we cutting them? I can foresee many responses. One, for example, is that people often oppose social spending because they believe it is bad for the economy. However, such programs are often great for the economy. They pump money into household, local, and state economies and increase spending on basics such as food, clothing, and travel. During the Great Recession of 2007–2009, SNAP was purposely expanded to help end the recession. SNAP delivered more than \$40 billion in economic stimulus through the Recovery Act. Every \$1 increase in SNAP benefits generates about \$1.70 in economic activity (Center on Budget and Policy Priorities 2019).

Golden Years? is a must-read for scholars and students across the social and health sciences, as well as policy analysts, corporate leaders, healthcare providers, social workers, and any others who work with aging populations. *Golden Years?* provides thorough coverage of aging research and policies—it is both wide and deep. Once I read it, I asked all of my graduate students to read it for content, then re-read it for style. Carr's writing is lively, concise, and critical, making it accessible for undergraduates while useful for scholars in the field. She takes a multi-disciplinary approach that explores topics from multiple vantage points. She has read virtually all of the literature, and the fact that she is so well read means that her readers soon will be as well. Her focus is old age, but she addresses each topic from a decidedly life course perspective. Most importantly, she pays robust and non-stop attention to the sources and impacts of inequality.

REFERENCE

Center on Budget and Policy Priorities 2019. Policy Basics: An Introduction to SNAP, accessed September 4, 2020. <https://www.cbpp.org/research/food-assistance/policy-basics-the-supplemental-nutrition-assistance-program-snap>