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## Immigration Is An Aging Issue

By Abigail Trafford  
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How they marched: tens of thousands in cities across the country, waving the American flag and calling for legislation that would legalize the presence of an estimated 11 million to 12 million illegal immigrants. A banner at a rally in Atlanta summed it up: "Give us a chance for a better life!"

But overlooked in the debate over how to secure borders and how to treat those already here -- legally and illegally -- is this: Immigration is an aging issue.

With more people living longer and couples having fewer children, the influx of immigrants -- who tend to be young adults -- helps stabilize the balance between generations. Immigrants who are working and paying taxes into Medicare and Social Security are really giving all of us a chance for a better life as we grow old.

This was not the case in earlier waves of immigration, when the population of the United States was relatively young and large families were common. But increased longevity and lower birth rates have turned the demographic makeup of the country upside down -- putting some distinguishing wrinkles on the face of America and raising questions about the impact of an aging society.

Who will be in the workforce to support the programs that support older men and women? And who will push the wheelchairs?

Immigrants are a critical part of the answer. "Anybody who looks at immigration has to look at aging," says Harry R. Moody, director of academic affairs at AARP.

"First, immigration affects the age structure of society" by adding younger members to the population, he says. "Second, the people who do hands-on care work are immigrants. Look at our nursing homes! We have an image of people picking tomatoes -- that's not the whole story. Immigrants are the front-line caregivers."

Most immigrants are in their prime working years. In 2004, a little more than 946,000 immigrants were legally admitted to the country, according to the latest figures from the Office of Immigration Statistics in the Department of Homeland Security. Only about 137,000 were over 50. About 154,400 were under 16. The rest -- about 655,000 men and women -- were 16 to 49, with peak numbers between the ages of 25 and 39.

In the greater Washington area, most of the immigrants who were admitted that year were between 25 and 44, with the greatest concentration in those 25 and 34.

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Immigrants also tend to have larger families, which helps raise the U.S. birthrate slightly above the level needed to replace the current population. Without immigration, our birth rate would be below replacement level. That is the situation in Europe, which faces more dire problems because of its aging population. Italy already looks like a retirement community, with about 20 percent of the population over 65. Japan, with no immigration and one of the world's lowest birthrates, is also confronting the consequences of its graying society.

Obviously, immigration alone can't solve the demographic challenge of aging. That will require restructuring society to take advantage of the talents of an older population while at the same time providing care and support to the frail and needy. One option involves raising expectations that people will work in some capacity beyond the accepted retirement age of 65 and tightening eligibility for such public programs as Medicare. Another involves retraining people for post-retirement careers and making the business case for retaining and hiring workers over 55. A third option is to fight age discrimination in the workplace, stall the trend of early retirement and find ways that allow people to stay in the labor force.

Restructuring society along these lines will not be easy or painless -- or without major political debate.

What immigration does is to postpone the day of reckoning so that we can start the debate now and develop a national blueprint to meet the needs of our aging population. AARP's Moody estimates that immigration has bought us about 30 years before we reach a demographic high noon, when -- if nothing is done -- increasing numbers of older people will force what may be unpalatable economic and political choices on an unprepared society.

Meanwhile, immigration helps to fill essential jobs caring for people in hospitals and nursing homes. The nationwide shortage of nurses remains significant. The Bureau of Labor Statistics reports that the health care system will require more than 1.2 million new nurses between 2004 and 2014, in part because the average age of a nurse is more than 46. "A cohort of nurses is about to retire when health needs are about to burgeon because of the aging of the population," says Erin McKeon, associate director for government affairs at the American Nurses Association.

Foreign-born and foreign-trained nurses are taking up the slack. They come from many countries -- Nigeria, India, South Korea, Canada, Jamaica. More than half come from the Philippines. In California, about a quarter of all nurses are from outside the United States. Health officials are quick to point out that immigration should not be the main answer to staffing shortages. Part of the problem is that there are not enough teaching programs in this country to train all the qualified applicants who want to go into the health care professions. (A subject for another column.) But for now, immigrants play a large role in the lives of older men and women.

In the assisted living facility in Boston where my 94-year-old stepmother resides, most of the aides are foreign-born. Moody's 86-year-old father, who lives in Orlando, has started to learn Spanish so he can communicate better with the folks who work at the clinic.

It's demographics, stupid! Aging and immigration go hand in hand. ·

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