Close your eyes and think about what your life might be like when you’re seventy-five years old. What will you look like? Where will you be living? Who will you live with? Will you be healthy and active, filling your days with the hobbies and interests that you enjoyed in your younger years? Or do you expect that health problems and diminishing sight, hearing, or memory might limit what you do each day? Will you live extravagantly, enjoying the best of everything, or frugally on a fixed income?

Some readers may have no idea what their future might look like. Others might find this mental exercise to be difficult and even frightening, presuming that “old age” is synonymous with illness, loneliness, and imminent death. Some believe they will resemble their grandparents or great-grandparents, presuming the apple doesn’t fall far from the tree. Others think they’ll be nothing like their grandparents, whom they see as belonging to a generation that is less nimble with a smartphone, more traditional in their views toward things like politics and sexuality, and more likely to eat meat and potatoes for dinner rather than healthier vegan fare.

The imaginary crystal ball we are peering into reveals some important truths about aging. None of us (even those with a penchant for cosmetic surgery) will look the same at age seventy-five as we did at age twenty.
Biological changes are an inevitable part of growing old. The dewy skin tone, lustrous hair color, clear vision, sharp hearing, firm muscle tone, mental quickness, and strong heart and lungs that many young people have will change with passing years. Yet other characteristics that we might associate with old age, like conservative political views or a preference for jazz music, aren’t necessarily linked to one’s biological age. Rather, age also reflects the year in which we were born, making us members of a particular generation or birth cohort. Cohorts born in the 1930s who were children during World War II have different life experiences than those born in the 1950s and 1960s who grew up during the Vietnam War era. Those two cohorts, in turn, differ from persons born in later decades. Sweeping economic, technological, and cultural changes throughout the twentieth and twenty-first centuries mean that older adults in 2050 will have led very different lives than those who are retirement-age today, transforming what “old age” looks and feels like—an important process that social scientists call cohort replacement (Mannheim 1952).

Cohorts are an important yet contested concept in sociology. Some scholars argue that snappy monikers like “Baby Boomer” are meaninglessness and perpetuate baseless stereotypes, such as “Gen Xers are slackers,” “Millennials are addicted to technology,” and members of “Generation Z live their lives on TikTok.” Another critique is that any single cohort, like the Baby Boomers born between 1946 and 1964, is so large and diverse that its members can’t be universally characterized (Cohen 2021; Duffy 2021). Despite these concerns about cohort labels, experts agree that the historical period someone grows up in can shape key aspects of their lives, including when and if they marry and buy a home, the kind of jobs they hold, and how they grow old. Throughout the book, I will use these (contented) labels as shorthand only to identify persons born in the following years: Silent Generation (born 1928–1945), Baby Boomers (born 1946–1964), Generation X (born 1965–1980), Millennials (born 1981–1996), and Generation Z (born 1997–2012).

Although members of a single cohort are born at roughly the same time, cohort members are highly diverse. They differ from one another on the basis of characteristics like their sex, sexual orientation, race, ethnicity, education, social class, and more. Our social characteristics—and the structural opportunities and obstacles associated with those
characteristics—shape our lives at every age and set the stage for how we grow old. For example, let’s meet the two oldest living Americans as of January 1, 2021: Hester Ford, who celebrated her 115th birthday in August 2020, and Iris Westman, who is just two weeks younger.\footnote{Hester was born in South Carolina in 1905. As a child, she and her parents labored on a farm picking cotton, plowing, and cutting wood. Hester married at age fifteen, and went on to have 12 children, 53 grandchildren, 120 great-grandchildren, and a remarkable 126 great-grandchildren. She worked as a nanny and volunteered at her church in North Carolina, where she and her family moved in the 1950s (\emph{QCity Metro} 2019). Hester shares her extreme longevity with Iris, yet their lives have few other similarities. Iris was born in North Dakota, and her parents were farmers. From a young age, Iris knew she would attend college. She earned her degree from the University of North Dakota in 1928 and was an English teacher before becoming a school librarian (Wallevand 2020). Like Hester, Iris was active in her church and sang in the choir. But their family lives couldn’t be more different; Iris never married or had children, whereas Hester had dozens of offspring.}

These divergent life paths, of two women born just two weeks apart, reveal the power of social, legal, and historical forces in shaping the life course, a theme that weaves throughout this book (Elder 1994). Hester, an African American woman, had limited opportunities for schooling as a child in the Jim Crow South; at that time, segregation laws codified a system of racial oppression. By law, Hester’s home state of South Carolina had separate but vastly unequal schools for Black and white children. In the 1910s, annual school expenditures in South Carolina averaged about $15 for each white child, but just $2 for each Black child. In rural areas like Hester’s hometown of Lancaster, schools for Black children ran just 70 days a year, compared to 140 days for white children (Bartels 1994). Children from poor families and Black families often dropped out of school and worked to support their parents and siblings. In stark contrast, Iris Westman had the good fortune to graduate high school and college and to work for decades in a professional career. She never married, which was a relatively common pattern among college-educated women in the early twentieth century. Women at that time often had to choose between a career and a family—a choice that may seem unimaginable to
college women in the twenty-first century who are raised to believe they can “have it all” (Solomon 1985). The lives of Hester and Iris provide clues into why individual experiences in old age vary so widely; their birth cohort, geographic location, race, gender, and socioeconomic status shape their life paths.

Social factors like education also matter at the population level. Whether a society is young or old, rich or poor, or highly educated or poorly educated, has important consequences for all members of that society and for the social policies intended to protect them. For instance, in 1950, just 20 percent of US adults ages sixty-five and older had graduated high school, whereas 80 percent of older adults in 2020 have earned their diploma. This historical shift means that older adults today, on average, have greater health, financial, and legal literacy than the generations that came before them. Societal-level increases in education are a key reason why the US population is aging so rapidly: more education is associated with longer lives. Education is linked with healthy behaviors like not smoking, a major factor in reducing deaths from smoking-related causes like lung cancer throughout the late twentieth and early twenty-first centuries (Meara, Richards, and Cutler 2008). Populations with higher levels of education also tend to marry at older ages, waiting until after they’ve finished their schooling to wed and have children. As a result, couples are having fewer children today than they did in the mid-twentieth century, a social pattern that affects the overall age structure of a society (Rindfuss and Sweet 2013).

The ways that individuals and populations age is a fascinating and timely topic. The United States population is older than ever before; in 2020, adults ages sixty-five and over accounted for 17 percent of the total population, as shown in figure 1. One in five Americans will be age sixty-five or over by 2030, and a remarkable one in four will have reached old age by 2060. The “graying” of America will affect nearly every aspect of life. Population aging creates demands for doctors and caregivers to tend to older patients’ health needs, advertising executives keen to sell prescription medications and anti-wrinkle creams to this large and profitable market, elder care lawyers who help their clients with legal matters like estate planning, biomedical engineers who create assistive devices like hearing aids and robotic helpers, and architects who design homes and
apartments with ramps and other features to meet the needs of older residents (Hannon 2011). Economists and policy makers caution that a population with many retirement-age persons who receive Social Security and Medicare benefits yet relatively few working-age persons paying federal income taxes could lead to a financial crisis. These challenges were intensified by the COVID-19 pandemic, which first threatened global health in 2020, with older adults particularly vulnerable to both the disease and the social isolation required to limit exposure to the virus. The burning question for citizens and policy makers alike is: how will our nation care and provide for the projected ninety-eight million older Americans in 2060?

This question is one of many at the core of the demography of aging. *Demography* is an academic field that focuses on the size, distribution, and composition of a population. *Size* refers to how large a population is, such as the number of persons ages sixty-five and older in the United States.
in 2020 (fifty-six million) versus 2060 (projected at ninety-eight million). 

*Distribution* tells us how a population is dispersed across space, such as whether they are densely clustered in cities or sparsely spread across rural towns. For example, rural areas make up 97 percent of the US land area but are home to just 19 percent of the overall population. That’s because residents are concentrated in urban and suburban areas, leaving vast swaths of land unpopulated or very sparsely populated, primarily in the western and central United States (US Census Bureau 2016). *Composition* tells us about the characteristics of a population, such as their age, race, ethnicity, physical health, or national origin. For instance, a college town like Ann Arbor, Michigan, has a high proportion of residents who are ages eighteen to twenty-four, whereas a retirement community like The Villages in Florida is home almost exclusively to older adults. Building upon these three foundational concepts, this book will explore the reasons why the age sixty-five-plus population is growing so dramatically, how the demographic and socioeconomic characteristics of older adults shape their everyday lives, and the implications of population aging for the future of US and global society. Before delving more fully into the causes and consequences of population aging, it’s important to first identify precisely what aging is, the measures demographers use to document aging, and the demographic processes that drive population aging.

**DEFINING OLD AGE AND AGING**

What is “old age”? Folksy sayings tell us that “age is a state of mind,” and “you’re only as old as you feel.” But demographers have a much more concrete definition. Older adults are defined as persons ages sixty-five and older. Recognizing that sixty-five-year-olds have little in common with those in their nineties, demographers further identify three subgroups: *young-old*, who are ages sixty-five to seventy-four; *middle-old*, who are ages seventy-five to eighty-four; and the *old-old* or *oldest old*, who are ages eighty-five and older. *Centenarians*, or persons ages one hundred and older, are distinguished as a special group. Although centenarians like Hester Ford account for only 0.2 percent of the US population, scientists extensively study these very aged individuals because they provide