Approximately 2.6 million non-Latino White American women and men in California are of retirement age (65 and over). Another 3.5 million are of pre-retirement age (between 50 and 64). These groups represent 53 percent of California's 50-64 population, 62 percent of its 65 and over population, and, when combined, 16 percent of its total population. This Short Subject presents information from the most recent California Health Interview Survey (CHIS)¹ about the health risk factors, economic security, and health-related caregiving of older California Whites and considers differences across levels of educational attainment.

**HEALTH RISK FACTORS**

Figure 1 presents information about some health-related risk factors, ranging from insurance coverage to exercise, that may impact healthy aging. Approximately 6 percent of California's Whites over the age of 50 are uninsured. Because most California residents are eligible for Medicare when they turn 65, the majority of the uninsured are between the ages of 50 and 64. Coverage rates vary little with educational attainment, though Whites without any college experience are more likely to be uninsured than are those who went to college.

Estimates suggest that more than 60 percent of California Whites 50 years old and over are overweight or obese and that fewer than 30 percent report exercising vigorously. There are notable differences with regard to obesity and education. Those who did not go to college are more likely to be overweight and less likely to exercise. Smoking and drinking (consumption of at least four alcoholic drinks for women and five for men in a day at least once a month) are far less prevalent than obesity. While episodic drinking does not vary significantly with education level, individuals who went on to college are less likely to smoke cigarettes than are those who did not.

**ECONOMIC SECURITY**

Figure 2 provides data about the economic security of California Whites over the age of 50. Based on estimates from the CHIS data, less than 5 percent of this group are food insecure (e.g., cannot afford to purchase sufficient food and eat balanced meals) and/or are in poverty. A little more than 15 percent live below 200 percent of the poverty level, a threshold that is roughly comparable to the California Elder Economic Security Standard Index average. About 5 percent receive governmental assistance through TANF, CalWORKs, SSI, and/or food stamps. As a group, older Whites are 60 to 75 percent less likely to demonstrate these economic security risks than are other older Californians.

Economic security is also related to educational attainment. While there is little difference with respect to home ownership, older California Whites who did not go to college are twice as likely to have food insecurity, lower incomes, and receive public assistance than are those with at least some college.
Informal caregiving is an important dimension of healthy aging as many individuals age 50 and over provide or receive care for long-term illnesses or disabilities. Among the White CHIS participants ages 50 and over, just under 30 percent provide care to friends or family members at some time during the year (Figure 3). As a group, they are about 38 percent more likely to report providing care than are other older Californians from different race/ethnic categories. Less than 10 percent report spending more than 20 hours a week providing care and fewer than 5 percent use respite care services.

From the CHIS data we can infer that at least 850,000 California Whites over the age of 50 receive informal care because 14 percent of respondents indicated that they provide care to a parent. Notably, this inference assumes that the parents receiving care are also White.

Similarly, the most recent American Community Survey estimates from the U.S. Census Bureau indicate that more than 660,000 California Whites over the age of 50 have disabilities that limit their ability to live independently. It is likely that many of these people receive some support from friends and family.

Further Reading

Susan C. Reinhard, Carol Levine, and Sarah Samis, Family Caregivers Providing Complex Chronic Care, AARP and United Hospital Fund, 2012.

References