



# OLDER AMERICANS 2012

*Key Indicators of Well-Being*

## Federal Interagency Forum on Aging-Related Statistics

The Federal Interagency Forum on Aging-Related Statistics (Forum) was founded in 1986 to foster collaboration among Federal agencies that produce or use statistical data on the older population. Forum agencies as of June 2012 are listed below.

### **Department of Commerce**

U.S. Census Bureau  
<http://www.census.gov>

### **Department of Health and Human Services**

Administration on Aging  
<http://www.aoa.gov>

Agency for Healthcare Research and Quality  
<http://www.ahrq.gov>

Centers for Medicare and Medicaid Services  
<http://www.cms.hhs.gov>

National Center for Health Statistics  
<http://www.cdc.gov/nchs>

National Institute on Aging  
<http://www.nia.nih.gov>

Office of the Assistant Secretary for Planning and Evaluation  
<http://aspe.hhs.gov>

Substance Abuse and Mental Health Services Administration  
<http://www.samhsa.gov>

### **Department of Housing and Urban Development**

<http://www.hud.gov>

### **Department of Labor**

Bureau of Labor Statistics  
<http://www.bls.gov>

Employee Benefits Security Administration  
<http://www.dol.gov/ebsa>

### **Department of Veterans Affairs**

<http://www.va.gov>

### **Environmental Protection Agency**

<http://www.epa.gov/>

### **Office of Management and Budget**

Office of Statistical and Science Policy  
[http://www.whitehouse.gov/omb/inforeg\\_statpolicy](http://www.whitehouse.gov/omb/inforeg_statpolicy)

### **Social Security Administration**

Office of Research, Evaluation, and Statistics  
<http://www.ssa.gov>

# OLDER AMERICANS 2012

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## Foreword

Just last year, the oldest members of the “Baby Boom” generation (that is, Americans born between 1946 and 1964) turned 65. As has been the case since the birth of this cohort, this very large generation will bring important challenges to the systems and institutions that support and enhance American life. Although many Federal agencies provide data on aspects of older Americans’ lives, it can be difficult to fit the pieces together. Thus, it has become increasingly important for policymakers and the general public to have an accessible, easy-to-understand portrait of how older Americans fare.

*Older Americans 2012: Key Indicators of Well-Being (Older Americans 2012)* provides a comprehensive, easy-to-understand picture of our older population’s health, finances, and well-being. It is the sixth such chartbook prepared by the Federal Interagency Forum on Aging-Related Statistics (Forum). Readers will find here an accessible compendium of indicators drawn from the most reliable official statistics. The indicators are again categorized into five broad groups: population, economics, health status, health risks and behaviors, and health care. In addition, the report contains a special feature on end-of-life care and place of death.

Many of the estimates reported in *Older Americans 2012* were collected in 2008 and 2009. Thus, many of the indicators in this report reflect the experience of older Americans during this economically challenging time period. What has yet to be reported here is the longer-term impact of the recession and its financial disruptions. In response, the Forum has initiated a closer look at the earnings, savings, and income of older Americans, particularly given recent changes to retirement and pension plans. Those findings will be shared in a future report.

Although Federal agencies currently collect and report substantial information on the population age 65 and over, other important gaps in our knowledge remain. Two years ago, in *Older Americans 2010*, the Forum identified six such data need areas: caregiving, elder abuse, functioning and disability, mental health, residential care, and end of life. In *Older Americans 2012*, we provide updated information on the status of data availability for these specific areas, in addition to the end of life special feature.

We continue to appreciate users’ requests for greater detail for many existing indicators of well-being. We also extend an invitation to all of our readers and partners to let us know what else we can do to make our reports and other products more accessible and useful. Please send your comments to [agingforum@cdc.gov](mailto:agingforum@cdc.gov).

The *Older Americans* reports reflect the Forum’s commitment to advancing our understanding of where older Americans stand today and what they may face tomorrow. I congratulate the Forum agencies for joining together to present the American people with such valuable tools for understanding the well-being of the older population. Last, but not least, none of this work would be possible without the continued cooperation of millions of American citizens who willingly provide the data that are summarized and analyzed by staff in the Federal agencies for the American people.

**Katherine K. Wallman**  
*Chief Statistician*  
*Office of Management and Budget*

## Acknowledgments

*Older Americans 2012: Key Indicators of Well-Being* is a report of the Federal Interagency Forum on Aging-Related Statistics (Forum). This report was prepared by the Forum's planning committee and reviewed by the Forum's principal members, which include John Wren, Administration on Aging (AoA); Steven B. Cohen, Agency for Healthcare Research and Quality (AHRQ); Thomas Nardone, Bureau of Labor Statistics (BLS); Howard Hogan and Nancy Potok, U.S. Census Bureau; Thomas Reilly, Centers for Medicare and Medicaid Services (CMS); Raphael W. Bostic, Department of Housing and Urban Development (HUD); Joseph Piacentini, Employee Benefits Security Administration (EBSA); Kathy Sykes, Environmental Protection Agency (EPA); Edward Sondik, National Center for Health Statistics (NCHS); Richard Suzman, National Institute on Aging (NIA); Ruth Katz, Office of the Assistant Secretary for Planning and Evaluation (ASPE), Department of Health and Human Services; Katherine K. Wallman, Office of Management and Budget (OMB); Daryl Kade, Substance Abuse and Mental Health Services Administration (SAMHSA); Manuel de la Puente, Social Security Administration (SSA); and Dat Tran, Department of Veterans Affairs (VA).

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Member agencies of the Forum provided funds and valuable staff time to produce this report. NCHS and its contractor, American Institutes for Research (AIR), facilitated the production, printing, and dissemination of this report. Simone Robers and Melissa Wentzel, AIR, managed the report's production process. Katie Mallory, AIR-MacroSys, designed the layout and supervised the overall presentation of the report; Richard Devens, First XV Communications, provided consultation and editing services. Patricia L. Wilson, CDC, managed the printing of the report.

# About This Report

## Introduction

*Older Americans 2012: Key Indicators of Well-Being (Older Americans 2012)* is the sixth in a series of reports by the Federal Interagency Forum on Aging-Related Statistics (Forum) describing the overall condition of the U.S. population age 65 and over. The reports use data from over a dozen national data sources to construct broad indicators of well-being for the older population and to monitor changes in these indicators over time. By following these data trends, the reports make more information available to target efforts to improve the lives of older Americans.

The Forum hopes that this report will stimulate discussions by policymakers and the public, encourage exchanges between the data and policy communities, and foster improvements in Federal data collection on older Americans. By examining a broad range of indicators, researchers, policymakers, service providers, and the Federal government can better understand the areas of well-being that are improving for older Americans and the areas of well-being that require more attention and effort.

## Structure of the Report

*Older Americans 2012*, by presenting data in a nontechnical, user-friendly format, complements other more technical and comprehensive reports produced by the individual Forum agencies. The report includes 37 indicators that are grouped into five sections: Population, Economics, Health Status, Health Risks and Behaviors, and Health Care.

There is also a special feature on end-of-life issues. A list of the indicators included in this report is located in the Table of Contents.

Each indicator includes the following:

- An introductory paragraph that describes the relevance of the indicator to the well-being of the older population.
- One or more charts that graphically describes important aspects of the data.
- Bulleted highlights of salient findings from the data and other sources.

The data used to develop the indicators are presented in table format in the back matter of the report. Data source descriptions and a glossary are also provided in the back matter of the report.

## Selection Criteria for Indicators

*Older Americans 2012* presents 37 key indicators of critical aspects of older people's lives. The Forum chose these indicators because they meet the following criteria:

- Easy to understand by a wide range of audiences.
- Based on reliable, nationwide data sponsored, collected, or disseminated by the Federal government.
- Objectively based on substantial research that connects the indicator to the well-being of older Americans.
- Balanced so that no single section dominates the report.
- Measured periodically (but not necessarily annually) so that they can be updated as appropriate and permit description of trends over time.
- Representative of large segments of the aging population, rather than one particular group.

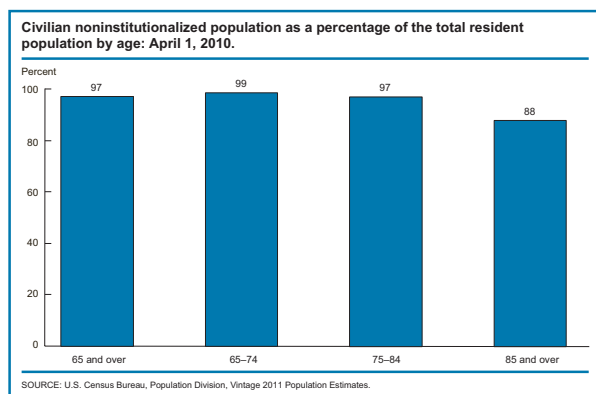
## Considerations When Examining the Indicators

The data in *Older Americans 2012* usually describe the U.S. population age 65 and over. Mutually exclusive and exhaustive age groups (e.g., age 65–74, 75–84, and 85 and over) are reported whenever possible.

Data availability and analytical relevance may affect the specific age groups that are included for an indicator. For example, because of small sample sizes in some surveys, statistically reliable data for the population age 85 and over often are not available. Conversely, data from the population younger than age 65 sometimes are included if they are relevant to the interpretation of the indicator. For example, in “Indicator 11: Participation in the Labor Force,” a comparison with a younger population enhances the interpretation of the labor force trends among people age 65 and over.

To standardize the age distribution of the age 65 and over population across years, some estimates have been age adjusted by multiplying age-specific rates by time-constant weights. If an indicator has been age adjusted, it will be stated in the note under the chart(s) as well as under the corresponding table(s).

The reference population (the base population sampled at the time of data collection) for each indicator is clearly labeled under each chart and table and defined in the glossary. Whenever possible, the indicators include data on the U.S. resident population (both people living in the community and people living in institutions). However, some indicators show data only for the civilian noninstitutionalized population. Because the older population residing in nursing homes (and other long-term care institutional settings) is excluded from samples based on the noninstitutionalized population, caution should be exercised when attempting to generalize the findings from these data sources to the entire population age 65 and over. This is especially true for the older age groups. For example, in 2010, 12 percent of the population age 85 and over was not included in the civilian noninstitutionalized population as defined by the U.S. Census Bureau.



## Survey Years

In the charts, tick marks along the x-axis indicate years for which data are available. The range of years presented in each chart varies because data availability is not uniform across the data sources. To standardize the time frames across the indicators, a timeline has been placed at the bottom of each indicator that reports data for more than one year.



## Accuracy of the Estimates

Most estimates in this report are based on a sample of the population and are therefore subject to sampling error. Standard tests of statistical significance have been used to determine whether differences between populations exist at generally accepted levels of confidence or whether they occurred by chance. Unless otherwise noted, only differences that are statistically significant at the 0.05 level are discussed in the text. To indicate the reliability of the estimates, standard errors for selected estimates in the chartbook can be found on the Forum's Web site at <http://www.agingstats.gov>.

Finally, the data in some indicators may not sum to totals because of rounding.

## Sources of Data

The data used to create the charts are provided in tables in the back of the report. The tables also contain data that are described in the bullets below each chart. The source of the data for each indicator is noted below the chart.

Descriptions of the data sources can be found in the back of the report. Additional information about these data sources is available on the Forum's Web site at <http://www.agingstats.gov>. For those who wish to access the survey data used in this chartbook, contact information is given for each of the data sources.

Occasionally, data from other publications are included to give a more complete explanation of the indicator. The citations for these sources are included in the "References" section.

## Data Needs

Because *Older Americans 2012* is a collaborative effort of many Federal agencies, a comprehensive array of data was available for inclusion in this report. However, even with all of the data available, there are still areas where scant data exist. Although the indicators that were chosen cover a broad range of components that affect well-being, there are other issues that the Forum would like to address in the future. These issues are identified in the "Data Needs" section.

## Mission

The Forum's mission is to encourage cooperation and collaboration among Federal agencies to improve the quality and utility of data on the aging population.

The specific goals of the Forum are:

- Widening access to information on the aging population through periodic publications and other means.
- Promoting communication among data producers, researchers, and public policy-makers.
- Coordinating the development and use of statistical databases among Federal agencies.
- Identifying information gaps and data inconsistencies.
- Investigating questions of data quality.
- Encouraging cross-national research and data collection on the aging population.
- Addressing concerns regarding collection, access, and dissemination of data.

## More Information

If you would like more information about *Older Americans 2012* or other Forum activities, contact:

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E-mail: [agingforum@cdc.gov](mailto:agingforum@cdc.gov)  
Web site: <http://www.agingstats.gov>

## Older Americans on the Internet

Supporting material for this report can be found at <http://www.agingstats.gov>. The Web site contains the following:

- Data for all of the indicators in Excel spreadsheets (with standard errors, when available).

- Data source descriptions.
- PowerPoint slides of the charts.

The Forum's Web site also provides:

- Ongoing Federal data resources relevant to the study of the aging.
- Links to aging-related statistical information on Forum member Web sites.
- Other Forum publications (including *Data Sources on Older Americans 2009*).
- Workshop presentations, papers, and reports.
- Agency contacts.
- Subject area contact list for Federal statistics.
- Information about the Forum.

## Additional Online Resources

### Administration on Aging

Statistics on the Aging Population  
[http://www.aoa.gov/AoARoot/Aging\\_Statistics/index.aspx](http://www.aoa.gov/AoARoot/Aging_Statistics/index.aspx)

A Profile of Older Americans  
[http://www.aoa.gov/AoARoot/Aging\\_Statistics/Profile/index.aspx](http://www.aoa.gov/AoARoot/Aging_Statistics/Profile/index.aspx)

Online Statistical Data on the Aging  
[http://www.aoa.gov/AoARoot/Aging\\_Statistics/Census\\_Population/census1990/Introduction.aspx](http://www.aoa.gov/AoARoot/Aging_Statistics/Census_Population/census1990/Introduction.aspx)

### Agency for Healthcare Research and Quality

AHRQ Data and Surveys  
<http://www.ahrq.gov/data>

### Bureau of Labor Statistics

Bureau of Labor Statistics Data  
<http://www.stats.bls.gov/data>

### U.S. Census Bureau

Statistical Abstract of the United States  
<http://www.census.gov/compendia/statab>

Age Data  
<http://www.census.gov/population/www/socdemo/age.html>



Longitudinal Employer-Household Dynamics  
<http://lehd.did.census.gov/led/>

### **Centers for Medicare and Medicaid Services**

CMS Research, Statistics, Data, and Systems  
<http://www.cms.hhs.gov/Research-Statistics-Data-and-Systems/Research-Statistics-Data-and-Systems.html>

### **Department of Housing and Urban Development**

Policy Development and Research Information Services  
<http://www.huduser.org/>

### **Department of Veterans Affairs**

Veteran Data and Information  
<http://www1.va.gov/vetdata>

### **Employee Benefit Security Administration**

EBSA's Research  
<http://www.dol.gov/ebsa/publications/research.html>

### **Environmental Protection Agency**

Aging Initiative  
<http://www.epa.gov/aging>

Information Resources  
<http://www.epa.gov/aging/resources/index.htm>

### **National Center for Health Statistics**

Health Data Interactive  
<http://www.cdc.gov/nchs/hdi.htm>

Longitudinal Studies of Aging  
<http://www.cdc.gov/nchs/lsoa.htm>

Health, United States  
<http://www.cdc.gov/nchs/hus.htm>

### **National Institute on Aging**

NIA Centers on the Demography of Aging  
<http://www.agingcenters.org/>

National Archive of Computerized Data on Aging  
<http://www.icpsr.umich.edu/NACDA>

Publicly Available Datasets for Aging-Related Secondary Analysis  
<http://www.nia.nih.gov/researchinformation/scientificresources>

### **Office of the Assistant Secretary for Planning and Evaluation, HHS**

Office of Disability, Aging, and Long-Term Care Policy  
[http://www.aspe.hhs.gov/\\_/office\\_specific/daltcp.cfm](http://www.aspe.hhs.gov/_/office_specific/daltcp.cfm)

### **Office of Management and Budget**

Federal Committee on Statistical Methodology  
<http://www.fcsr.gov>

### **Social Security Administration**

Social Security Administration Statistical Information  
<http://www.ssa.gov/policy>

### **Substance Abuse and Mental Health Services Administration**

Center for Behavioral Health Statistics and Quality  
<http://www.samhsa.gov/data>

Center for Mental Health Services  
<http://www.mentalhealth.samhsa.gov/cmhs/MentalHealthStatistics>

### **Other Resources**

FedStats.gov  
<http://www.fedstats.gov>



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## Highlights

*Older Americans 2012: Key Indicators of Well-Being* is one in a series of periodic reports to the Nation on the condition of older adults in the United States. In this report, 37 indicators depict the well-being of older Americans in the areas of demographic characteristics, economic circumstances, health status, health risks and behaviors, and cost and use of health care services. This year's report also includes a special feature on the end of life. Selected highlights from each section of the report follow.

### Population

The demographics of aging continue to change dramatically. The older population is growing rapidly, and the aging of the “Baby Boomers” born between 1946 and 1964 (and who began turning age 65 in 2011), are accelerating this growth. This large population of older Americans will be more racially diverse and better educated than previous generations. Another significant trend is the increase in the proportion of men age 85 and over who are veterans.

- In 2010, there were 40 million people age 65 and over in the United States, accounting for 13 percent of the total population. The older population in 2030 is projected to be twice as large as in 2000, growing from 35 million to 72 million and representing nearly 20 percent of the total U.S. population (See “Indicator 1: Number of Older Americans”).
- In 1965, 24 percent of the older population had graduated from high school, and only 5 percent had at least a Bachelor's degree. By 2010, 80 percent were high school graduates or more, and 23 percent had a Bachelor's degree or more (See “Indicator 4: Educational Attainment”).

### Economics

There have been decreases in the proportion of older people living in poverty or in the low-income group just above the poverty line, both in recent years and over the longer term. Among older Americans, the share of income coming from earnings has increased since the mid-1980s, partly because more people, especially women, continue to work past age 55. In addition, net worth increased almost 80 percent, on average,

for older Americans between 1988 and 2007. Although most older Americans live in adequate, affordable housing, some live in costly, physically inadequate, or crowded housing. Additionally, major inequalities continue to exist: older blacks and people without high school diplomas report smaller economic gains and fewer financial resources overall.

- Between 1974 and 2010, there was a decrease in the proportion of older people with income below poverty from 15 percent to 9 percent and with low income from 35 percent to 26 percent; and an increase in the proportion of people with high income from 18 percent to 31 percent (See “Indicator 8: Income”).
- In 2007, the median net worth of households headed by white people age 65 and over (\$248,300) was almost three times that of older black households (\$87,800). This difference is less than in 1998 when the median net worth of households headed by older white people was about six times higher than that of households headed by older black people. The large increase in net worth in past years may not continue into the future due to recent declines in housing values (See “Indicator 10: Net Worth”).
- Over the past four decades, labor force participation rates have risen for women age 55 and over. This trend continued during the recent recession. Among men age 55 and over, the rise in participation rates that started in the mid-1990s also has continued, although to a smaller extent. As “Baby Boomers” approach older ages, they are remaining in the labor force at higher rates than previous generations (See “Indicator 11: Participation in the Labor Force”).
- In 2009, approximately 40 percent of older American households had housing cost burden (expenditures on housing and utilities that exceed 30 percent of household income). In addition to having cost burden as the most dominant housing problem, crowded housing was also fairly prevalent for some older American households with children in their homes (See “Indicator 13: Housing Problems”).

## Health Status

Americans are living longer than ever before, yet their life expectancies lag behind those of other developed nations. Death rates for certain diseases have declined over time, while others have increased. Older age is often accompanied by increased risk of certain diseases and disorders. Large proportions of older Americans report a variety of chronic health conditions such as hypertension and arthritis. Nevertheless, most people age 65 and over report their health as good, very good, or excellent.

- Life expectancy at age 65 in the United States was lower than that of many other industrialized nations. In 2009, women age 65 in Japan could expect to live on average 3.7 years longer than women in the United States. Among men, the difference was 1.3 years (See “Indicator 14: Life Expectancy”).
- Death rates for heart disease and stroke declined by slightly more than 50 percent since 1981. Death rates for chronic lower respiratory disease increased by 57 percent in the same time period (See “Indicator 15: Mortality”).
- The prevalence of certain chronic conditions differed by sex. Women reported higher levels of arthritis than men (56 percent versus 45 percent). Men reported higher levels of heart disease (37 percent versus 26 percent) (See “Indicator 16: Chronic Health Conditions”).
- During the period 2008–2010, 76 percent of people age 65 and over rated their health as good, very good, or excellent. Non-Hispanic Whites were more likely to report good health than their non-Hispanic Black or Hispanic counterparts (See “Indicator 18: Respondent-Assessed Health Status”).

## Health Risks and Behaviors

Social and lifestyle factors can affect the health and well-being of older Americans. These factors include preventive behaviors such as cancer screenings and routine vaccinations along with diet, physical activity, obesity, and cigarette smoking. The quality of the air where people live also affects health. Many of these health risks and behaviors have shown long-term improvements, even though recent estimates indicate no significant changes.

- In 2010, about 11 percent of people age 65 and over reported participating in leisure-time aerobic and muscle-strengthening activities that met the 2008 Federal physical activity guidelines (See “Indicator 24: Physical Activity”).
- As with other age groups, the percentage of people age 65 and over who are obese has increased since 1988–1994. In 2009–2010, 38 percent of people age 65 and over were obese, compared with 22 percent in 1988–1994. Over the past several years however, that trend has leveled off for older women, with no statistically significant change in obesity between 1999–2000 and 2009–2010. During this same time period, the obesity prevalence increased for older men (See “Indicator 25: Obesity”).
- The percentage of people age 65 and over living in counties that experienced poor air quality for any air pollutant decreased from 64 percent in 2000 to 36 percent in 2010 (See “Indicator 27: Air Quality”).
- The proportion of leisure time that older Americans spent socializing and communicating—such as visiting friends or attending or hosting social events—declined with age. For Americans age 55–64, about 11 percent of leisure time was spent socializing and communicating compared with 8 percent for those age 75 and over (See “Indicator 28: Use of Time”).

## Health Care

In the 1990’s and early 2000’s, health care costs rose rapidly for older Americans. However, average health care costs did not increase further between 2006 and 2008, after adjustment for inflation. Older Americans in the poor/near poor income category continued to spend a high proportion of their household income on health care services through 2009. In recent years increasing numbers of Medicare beneficiaries enrolled in HMOs and other health plans under the Medicare Advantage (MA) program.

- After adjustment for inflation, health care costs increased significantly among older Americans from \$9,850 in 1992 to \$15,709 in 2008. There was no significant change between 2006 and 2008 (See “Indicator 30: Health Care Expenditures”).

- From 1977 to 2009, the percentage of household income that people age 65 and over allocated to out-of-pocket spending for health care services increased among those in the poor/near poor income category from 12 percent to 22 percent (See “Indicator 33: Out-of-Pocket Health Care Expenditures”).
- Enrollment in health maintenance organizations (HMOs) and other health plans under the Medicare Advantage (MA) program has grown rapidly in recent years. In 2005, 16 percent of Medicare beneficiaries age 65 or over were enrolled in an MA plan, compared with 28 percent in 2009 (See “Indicator 32: Sources of Health Insurance”).

### End of Life

In the last decade there has been a substantial rise in the use of hospice services among older Americans. During that time, there has also been a smaller increase in the use of intensive care unit (ICU) and coronary care unit (CCU) services at the end of life. The percent of deaths among

older Americans that occurred in hospitals declined over the last 20 years, with an increase in the percent dying at home.

- Use of hospice in the last month of life increased from 19 percent of decedents in 1999, to 43 percent in 2009. Use of ICU/CCU services grew from 22 percent of decedents in 1999, to 27 percent in 2009.
- Neoplasms accounted for 53 percent of hospice stays in 1999 and only 32 percent in 2009. The next most common primary diagnoses in 2009 were diseases of the circulatory system (19 percent) and symptoms, signs, and ill-defined conditions (17 percent).
- Among older Americans, 49 percent of deaths occurred in hospitals in 1989, declining to 32 percent in 2009. The percent dying at home increased from 15 in 1989, to 24 percent in 2009.