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Diversity in Old Age: The Elderly in Changing Economic and Family Contexts

Judith A. Seltzer

*Department of Sociology and California Center for
Population Research, UCLA*

Jenjira J. Yahirun

*Population Research Center, University of Texas, Austin and
California Center for Population Research, UCLA*

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Charles Kenny's statement in *Bloomberg Business Week* that "the world is rapidly adding wrinkles" describes population aging in more visual terms than the terms used in most census reports (February 7, 2013). Declining fertility and increased life expectancy, language more recognizable in the demographic community, account for global growth in the old-age population. The U.S. population is part of the growth in wrinkles. Today more than 40 million Americans are age 65 and older (Howden and Meyer, 2011, table 1). This group makes up almost 13% of the U.S. population, more than a three-fold increase from 1900 (authors' calculations, U.S. Census Bureau, 1996). By 2050, one in five people in the United States will be at least 65 years old (Vincent and Velkoff, 2010, Table 2.1).

The elderly today differ from older adults in the past in three important ways. First, the experience of old age in America is marked by unparalleled diversity. Public discussion of the old-age population refers to this age group as the "elderly" or "seniors" as though this is a homogenous category. These terms mask the considerable diversity in the characteristics and experiences of those in this chronological age group. Each person brings a history of his or her experiences from early life and mid life into old age. The histories are shaped by whether a person is male or female, how much schooling and income the person has, race-ethnicity, and nativity. These characteristics and the life histories shaped by them continue to affect individuals' experiences in later life.

Second, the potential for the long reach of early and mid life experiences on later life is greater now than in the past. Increased longevity among older adults today provides opportunities for longer and more meaningful interactions with children and grandchildren and the potential for exchanges across multiple generations (Bengtson, 2001; Uhlenberg, 2005). The older generation today helps the younger generation by giving them the scarce resources of time

and money. Financial support provided by the older generation has become even more important in the past three decades (Wightman et al., 2013). Within families the economic welfare of the oldest generations has improved compared to the welfare of the younger generations. In the long term, improvements in the economic circumstances of the elderly, in large part due to the development and expansion of the Social Security system, have reduced poverty in the old age population. In the shorter term, the meltdown of the Great Recession increased debt more among younger generations than the elderly (Wolff, 2013).

Yet the flow of resources between older parents and their adult children is not simply about the money. When the oldest generation reaches advanced ages and when frailty and disease increase the need for help, the younger generation steps in to assist them, usually with time help (Seltzer and Bianchi, 2013). In addition, grandparents play an important role in the family safety net by helping their adult offspring with child care to contribute to the welfare of grandchildren. In extreme cases, grandparents step in to become primary caregivers for grandchildren whose parents are incapacitated.

Macro-level changes in family life mark a third difference in the experience of aging in the United States today, compared to earlier periods. Changes in the structure and composition of older persons' families test the strength of ties between aging parents and adult children. High rates of cohabitation and childbearing outside of marriage combined with high divorce rates for those who do marry weaken the bonds between parents and children. Father-child relationships are particularly vulnerable in light of the still prevailing pattern in which children live with their mother when their parents' relationship dissolves. Remarriage and repartnering through cohabitation have increased stepfamily and cohabiting- or quasi-stepfamily relationships. Ties to stepkin and kin connected by cohabitation are weaker than those among biological kin,

contributing further to the fraying of intergenerational bonds (Eggebeen, 2005, Ganong and Coleman 1999, Rossi and Rossi 1990, Seltzer et al., 2012).

Individuals who experienced these sweeping changes in the structure of U.S. families are now entering old age. They include members of the large Baby Boom cohort born 1946-64. Demographers date the start of the dramatic rise in nonmarital cohabitation around 1970, when the Baby Boomers were in young adulthood (Glick and Spanier, 1980; Seltzer, 2004). In addition, much of the steep rise in divorce rates occurred during the 1970s (Kennedy and Ruggles, 2013, figure 1). Now that those who experienced these dramatic family changes have reached old age we can begin to evaluate how these experiences shape individuals' later lives.

Exposure to these large-scale changes in family structure has varied for different sectors of the population. Nonmarital childbearing, divorce, cohabitation and re-partnering occur at higher rates among those with disadvantaged backgrounds. The divergence in the family experiences of those with and without college degrees has increased over the past 30-35 years (Cherlin, 2010). Marriage rates rose and divorce rates decreased for the college-educated at the same time that marriage and marital stability have become more difficult to attain for those without the benefit of a college education (Cherlin, 2010). As a consequence, older people with few educational and economic resources are likely to face even greater demands for help from their offspring and grandchildren than their well-educated counterparts face.

In light of these trends, this chapter addresses three key themes. We focus on those who are 65 years old or older by convention, although only a third of U.S. adults consider age 65 to be old (Pew, 2009).¹ The popular media tends to portray those age 65+ as one group with similar lifestyles and behaviors, but our analysis points to a more varied experience of growing old in

¹ We define the elderly as those who are 65 years old or older to build on Treas and Torrecilha's 1990 decennial census report (1995). The 2000 census series did not include a separate chapter on the older population, although it did include a chapter on cohort differences and the aging of the baby boom cohort (Hughes and O'Rand, 1995).

America at the beginning of the 21st century. Therefore our report first describes growing diversity among the elderly population. Second, a large share of today's older population – and their offspring – is experiencing family contexts affected by divorce and remarriage, cohabitation, and single parenthood. We explore how these large-scale demographic trends affect older people's lives and consider the implications for growing socioeconomic inequalities among families. Third, the increased longevity of older adults translates to longer periods of linked lives across generations (Bengtson 2001) and greater possibilities for meaningful roles as parents and grandparents. Thus we describe intergenerational transfers between older individuals and their children and grandchildren and variations in these relationships.

Data Sources

Much of what we know about the elderly in the United States comes from studies that collect data on individuals who live in the same household. These data sources provide important information on living arrangements and the economic welfare of those who share the work of managing a household, but as we will show, a significant minority of older adults live alone. Other studies collect data on individuals, with less attention to their living arrangements. These studies provide some information on individuals' social lives, but often do not include much data on who is in the older person's family and how the older person is involved with their adult children and grandchildren.

This report uses data on both living arrangements and older persons' family roles. We combine census and survey data to provide this portrait of the older population. We use data from the decennial censuses of 1970, 1980, 1990, and 2000, using IPUMS (Ruggles et al., 2010). For the most recent period, we use data from the American Community Surveys of 2007, 2008, and 2009. When we combine the three years we sometimes refer to the data as representing

2008, the mid-year point, for ease of presentation in figures. For some analyses, such as disability among the elderly, we restrict the analysis to 2008 and 2009, excluding 2007 because it included different measures of disability than in the latter two years.

The census data are restricted to characteristics of individuals and their living arrangements, including household composition. We combine the census data with data from two surveys: the Health and Retirement Study (HRS) and the June 2012 Survey of Consumers (SC). Both include information about the ties between parents and adult offspring whether or not they live in the same household. The HRS is approximately representative of the U.S. population over age 50 (<http://hrsonline.isr.umich.edu/>). These data include information on the composition and characteristics of older persons' families. We use data from 2008 and combine public use files from the Institute for Social Research (National Institute on Aging, 2007) with the Rand L file and the Rand Family B file (Chien et al., 2012; St. Clair et al., 2011).

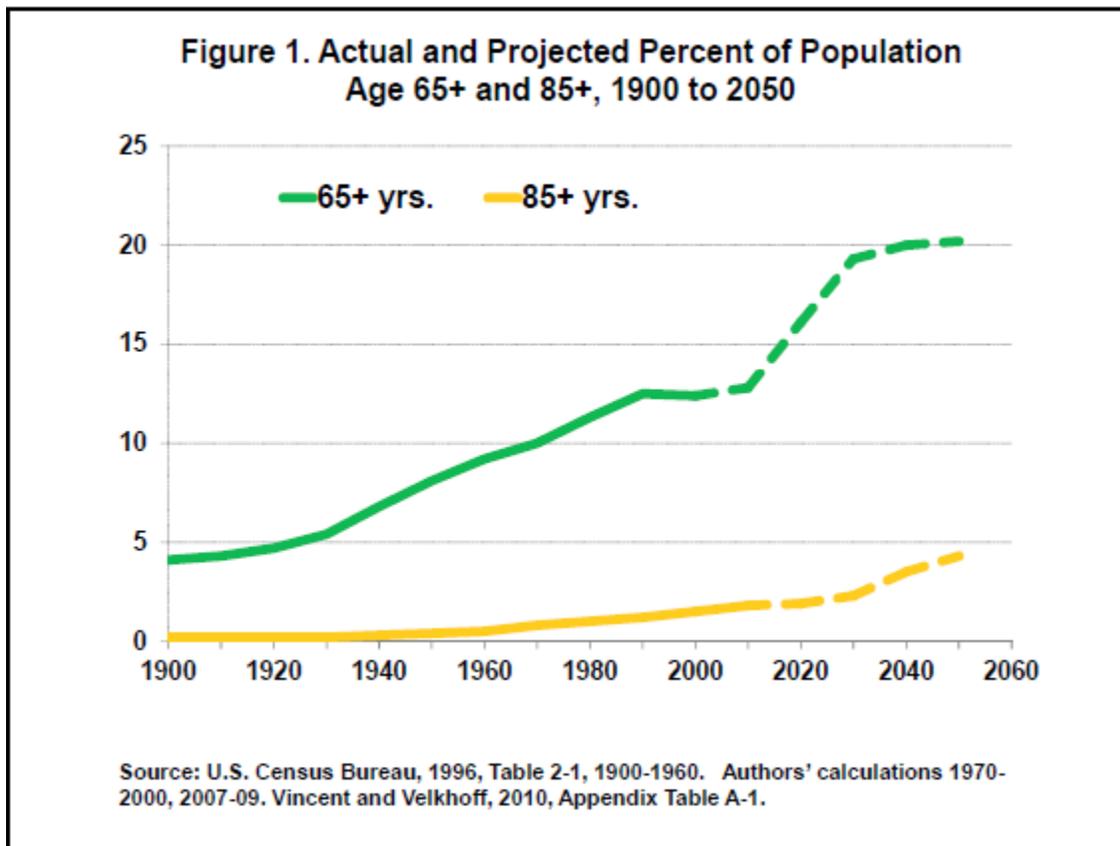
We combine these data with new information from the SC, a telephone survey of a small national probability sample of U.S. adults age 18 and older. The SC interviewed 495 respondents, of whom about two thirds had adult offspring (at least 18 years old). We use information about time and money that parents gave adult offspring in 2011, the year before the survey, and what we call long-term financial transfers since the child turned age 18 to help the child with educational expenses, housing (e.g., to purchase a home), and other long term expenses. Although the sample is small it provides new information about significant help that adult offspring receive from their parents that may contribute to inequality.

More information about the data we use is in the Appendix.

A Demographic Portrait of the Elderly

Growing racial, ethnic and nativity diversity of the older population

By the time individuals enter old age, they have accumulated a long history that informs how they behave and the resources available to them. This section provides a brief description of the individuals who make up the U.S. elderly population. Figure 1 shows the long term increase in the percentage of the U.S. population who are age 65 and older, and the percentage age 85 and older. There is a striking increase in the percentage of the population in the older age group since 1970. Improvements in life expectancy have contributed to an increase in the percentage of the population in the oldest age group, those 85+ years old. A child born today can expect to live to be 78.1 years old, but in 1900 expectation of life at birth was only 47.3 years (Arias, 2012, table 19).



Growth in the old-age population masks considerable diversity by gender, race-ethnicity, and nativity. Women live five years longer than men (80.6 years vs. 75.6 years), although life expectancy has increased for both women and men (Miniño et al. 2011, table 7). Women's greater life expectancy means that the age composition of the old-age population is much older for women than for men. Women make up 58% of the population age 65 and older, but they account for 68% of the population age 85+. Among those who are at least 85 years old, there are more than two women for each man among the "oldest old" (not shown). This is reflected in the gender differences in the marital status and living arrangements in later life that we describe below.

The elderly are racially and ethnically diverse but they are not as diverse as children. Today, about one in five older persons is a member of a race-ethnic minority (Table 1), but among children more than two in five is a minority (child data not shown). The greater race-ethnic heterogeneity among children than older adults is sometimes invoked to explain reluctance among the more racially homogeneous elderly to support public expenditures on children (Johnson and Lichter, 2010; Lynch, 2008; Preston, 1984). There also is greater race-ethnic diversity among prime-age workers than among the elderly. These prime-age workers are the labor pool who are, and will be, employed caring for the burgeoning old-age population. The increased heterogeneity in the younger age groups points to potential differences between the cultural orientations of caregivers and their clients (Olson, 2003). The different world views of caregivers and recipients are effectively portrayed in a *New York Times* "Op Doc" by Theo Rigby and Kate McLean (<http://www.nytimes.com/2013/06/25/opinion/the-caretaker.html>, June 25, 2013).

Table 1: Race/Ethnic Composition, Nativity, and Country of Origin of the Older Population (age 65+), 1970 to 2007-09					
	1970	1980	1990	2000	2007-09
Race/ethnicity					
White	89.5	88.1	86.9	83.7	80.0
African American	7.9	8.0	7.9	7.9	8.3
Asian	0.5	0.9	1.4	2.3	3.6
Hispanic	1.9	2.6	3.4	4.9	7.0
Other/Mixed/Native American	0.2	0.4	0.4	1.2	1.1
Foreign Born	15.9	11.9	8.9	9.8	13.0
Origin of Foreign Born					
From Europe	77.6	66.1	51.4	39.1	30.4
From Asia	3.7	6.4	13.2	22.0	27.1
From Latin America	6.3	11.4	20.2	30.0	35.5
From Africa	0.1	0.4	0.5	1.1	1.5
From elsewhere	12.4	15.6	14.7	7.8	5.6

Source: IPUMS, 1970, 1980, 1990, 2000. ACS 2007-09.
Note: Includes individuals living in group quarters. Hispanics include individuals of all races. Percentages are weighted.

Since 1970, the race-ethnic composition of the elderly has become somewhat more diverse as the generations with greater race-ethnic diversity grow into adulthood and then old age, as shown in Table 1. Among those 65+ in the three largest race-ethnic groups, the percentage of non-Hispanic Whites declined from 90% to 80% between 1970 and 2007-09. At the same time the percentage of Hispanics increased from 2% to 7%. The increase in Hispanics is due to their relatively high fertility and to immigration that occurred during and following WWII. Policies such as the Bracero program sanctioned migration streams between Mexico and the United States and lead entire communities in Mexico to send migrants to the United States. Increasing political and economic turmoil in Latin America and U.S. labor demand also contributed to the increased stream of Hispanic migrants (Rosenblum and Brick, 2011).

Consistent with the greater race-ethnic diversity of children and prime-age adults compared to the elderly, Whites are much older than African Americans, Hispanics, and those of other race-ethnicities. In 2009 the median age of non-Hispanic Whites was 41.2 years old. For African Americans, median age was ten years younger, 31.3, and for Hispanics of any race, only 27.4 (U.S. Statistical Abstracts, 2012, table 11). Whites are more than twice as likely as those in other race-ethnic groups to fall in the category of the oldest old, that is, those age 85+. In the coming decades, the elderly population will become more racially and ethnically diverse. Particularly notable will be the growth in the percentage of the elderly who are Hispanic, which projections place at 20% of those age 65+ in 2050 (Vincent and Velkoff, 2010, figure 5).

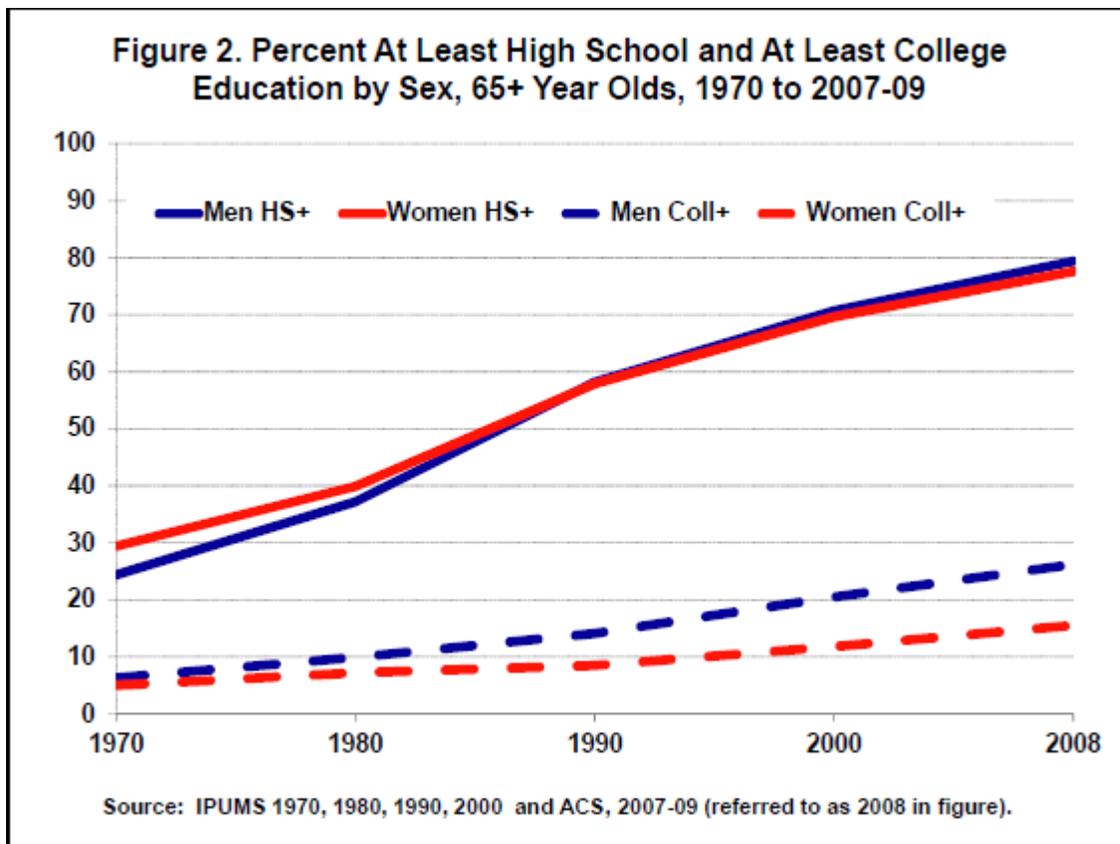
Another important dimension of diversity among the elderly is the extent to which they were born in the United States or came here as immigrants. Immigrants have fewer friends and family members available in the United States to help with everyday tasks, compared with U.S. natives (Hao, 2003). Immigrants also tend to have fewer social and economic resources than the native born (Burr et al., 2008; Torres-Gil and Treas, 2008). Perhaps as a result, Hispanic elderly report that many of their health and economic needs remain unmet even when they receive assistance from family members (Dietz, 1995).

About 13% of the elderly were born outside the United States, as shown in Table 1. Temporal variation in the percentage of immigrants reflects historical shifts in U.S. immigration policies and subsequent migration streams. These shifts also contribute to change in the countries of origin of the foreign-born elderly. The influence of changes in migration streams over the past century on the old-age population can be seen in the second panel of Table 1, which shows the distribution of regions of origin for elderly immigrants. In 1970 more than three quarters of the foreign-born elderly were immigrants from Europe owing to large waves of migration from

Southern and Eastern Europe early in the 20th century. By 2007-09, only 30% of all foreign-born elderly reported Europe as their place of origin, whereas 36% reported a country in Latin America as their birthplace. Immigrants from Asia also increased their share of the foreign-born elderly from 4% in 1970 to 27% in 2007-09. Decreases in the share of elderly immigrants from Europe and increases in the percentage of immigrants from Latin America as well as Asia are the result of dramatic increases in migration from Mexico following WWII, as well as changes to immigration policy that abolished national origin quotas and increased migrant flows from Asia.

Overall gains in education, but unequal gains in earnings and changing employment trends among the elderly

Education provides knowledge and skills that are rewarded in the labor market. The twentieth century was a time of rapid growth in the demand for education and in educational opportunities. These changes are beginning to play out in the characteristics of elderly Americans. At the start of the twentieth century, slightly less than one in five U.S.-born twenty-one year olds graduated from high school, but by the end of the century nearly nine out of ten were high school graduates (Fischer and Hout, 2006). Growth in high school education is reflected many decades later in the educational attainment of the old-age population. Figure 2 shows the trends in percentages of elderly men and women who have at least a high school degree and the percentages that have at least a college degree. In 1970 less than a third of elderly men and women were high school graduates. By the end of the first decade of the twenty-first century, about four out of five were high school graduates. Notably by 2007-09 women and men had very similar percentages with at least a high school degree.



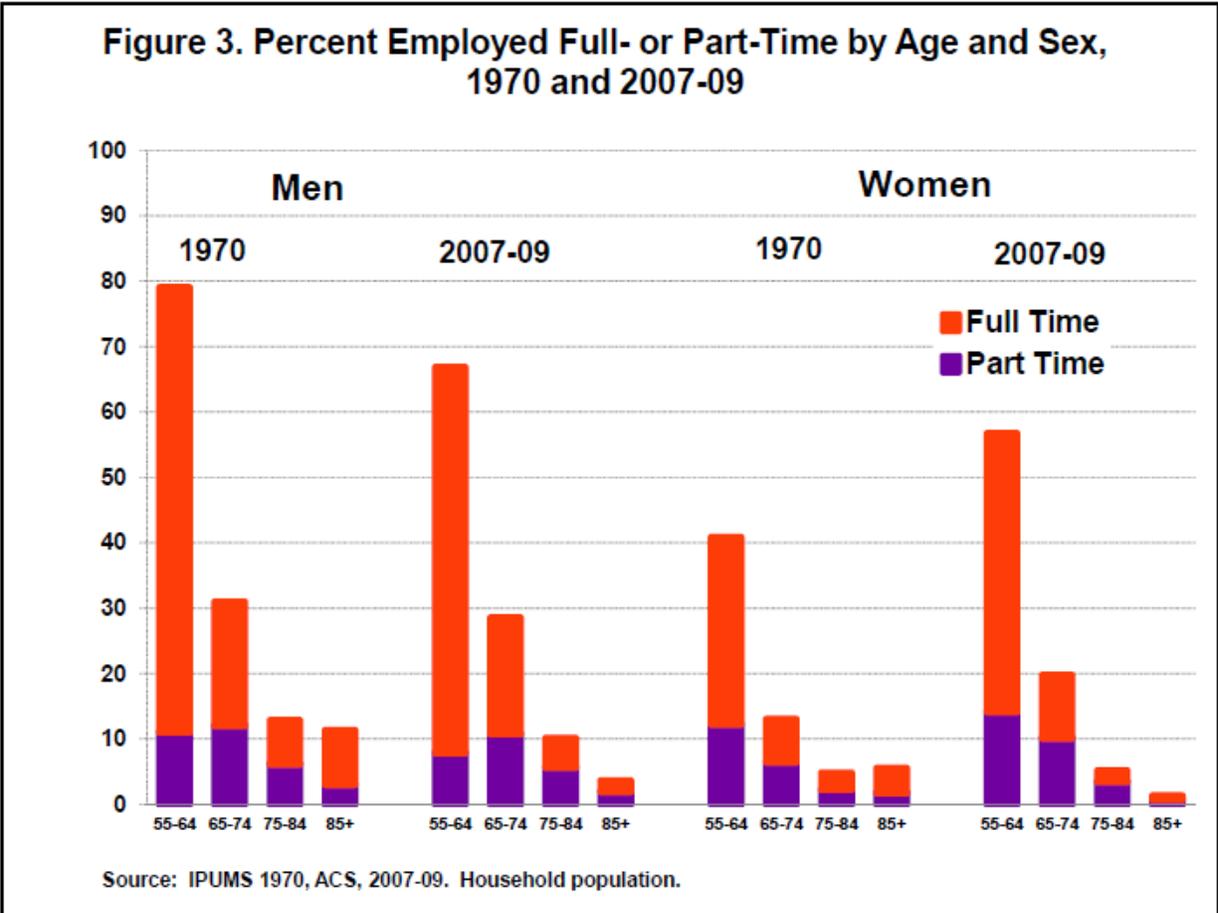
The twentieth century story for college graduation begins in the same way as the high school graduation story. Increasing percentages of young adults received a college education, and, over time, the percentage of the elderly with college degrees rose as well. Figure 2 shows that 27% of men and 16% of women age 65+ had college degrees by 2007-09, compared to 6% and 5% in 1970.²

Although today's elderly tend to be more educated than those in previous years, differences in earnings continued to grow among those with high school versus those with college degrees. The decline in U.S. manufacturing jobs has affected a large segment of today's

² In younger cohorts women have now surpassed men in their college graduation rates (DiPrete and Buchmann, 2013). As these cohorts reach old age, the gender gap in schooling among those 65+ will close and eventually reverse.

elderly by decreasing employment opportunities and reducing the value of job benefits for men with high school educations. Since 1979, older men without a high school degree have experienced a small decline in mean annual earnings from \$36,386 to \$35,200 in 2007. In contrast, the earnings of men with college degrees or more improved significantly over the same period from \$61,938 to \$84,104 (Holzer and Hlavec, 2012, table 1). This time period also saw increases in older women's earnings both for those with a college degree and those without college degrees, but women with college degrees gained much more. Their earnings rose from \$30,616 to \$52,874 (Holzer and Hlavec, 2012, table 1). These trends in earnings contributed to a continued growth in household income inequality since the 1970s (Heathcote et al., 2010).

For many individuals, employment continues to provide significant financial resources to the elderly even after they pass prime working ages. About 16% of the elderly are employed either full-time or part-time, despite media images of all elderly persons as retired. This image is more accurate for the oldest old, those 85+, than for the young old, those 65-74 years old. Figure 3 shows a decline in men's employment as they age (see left panel). In 2007-09, two thirds of men 55-64 years old were employed. But among those 65-74 just over 28% were employed. The comparison with 1970 shows that men in their 50s stop working earlier than they did previously. In 1970, 79% of men 55-64 years old were still employed. These figures mask diverse processes that depend on the types of jobs and career paths men follow (Han and Moen, 1999).



More fine-grained analyses show that men age 65 and older have increased their full-time employment (Gendell, 2008). This may be due to concerns about higher costs of health care, deterioration of private retirement benefits, or the greater number of years individuals expect to live after their mid 60s. Since the 1990s, changes to the Social Security system that increase the age at which individuals are eligible for full retirement benefits and raised the reward for delaying retirement until after the full retirement age have also contributed to the increase in labor force participation at older ages (Blau and Goodstein, 2010).

Retirement, like many aspects of aging, is a transition rather than a simple dichotomy in which a person is a worker one day and retired the next. Consistent with this view of retirement

as a process rather than clearly defined role transition (Han and Moen, 1999), only about half of older workers transition from full-time employment to retirement. Of the remainder, some workers choose partial retirement in which they continue to work part-time, while others retire and then return to work, essentially “unretiring.” Maestas (2010) uses longitudinal data from the Health and Retirement Study to estimate that between 26% and 40% of those who retire also unretire. The range of estimates is due to differences in the definition of retirement. Like full-time employment after age 65, unretirement has increased in recent decades (Maestas, 2010, pp. 724-25). Returns to work after retiring appear to be planned rather than a response to unexpected financial crises.

For women, the 1970 to present comparison tells a somewhat different story. Since 1970 there has been a continuation into old age of the rise in women’s labor force participation during prime ages. The right panel of Figure 3 shows that in 1970 only 41% of women age 55-64 were employed, but by 2007-09 nearly 57% were employed. For both women and men the percentage of 85+ year olds employed is lower in the current period than in 1970. Whether employment at advanced ages is more likely to be full-time or part-time varies somewhat by age, time period, and gender. Among those who have retired, women who are divorced or separated are more likely to unretire, that is, return to paid work, than married women (Pleau, 2010). Working into old age is one way these women address the low economic standard of living associated with the loss of a husband’s earnings or pension as well as the lasting disadvantages of single motherhood. Older women, regardless of their marital status, may return to work or remain in the labor force even after they reach the previously magic age of 65 to defray the rising costs of health care incurred over a longer life than women expected to live in the past.

Although we have described changes in individual men's and women's retirement patterns, husbands and wives may decide together when to retire so that they can enjoy more family and leisure time together. Blau (1998, table 3) estimates that 11-15% of older husbands and wives retire in the same 3-month period, and 30-41% exit the labor force within a 12 month period of each other. Evidence from economic models suggests that husbands and wives do take into account the opportunity to spend more time together when they retire (Michaud and Vermeulen, 2011). Other aspects of family life, such as caregiving responsibilities for older parents or young grandchildren may hasten retirement, especially among women (Szinovacz et al., 2012). Little is known about whether or not and how spouses in remarriages or cohabiting unions consider each other in deciding when to retire.

Wealth and poverty in old age: Better off than the younger population, but considerable diversity by race, ethnicity, and gender

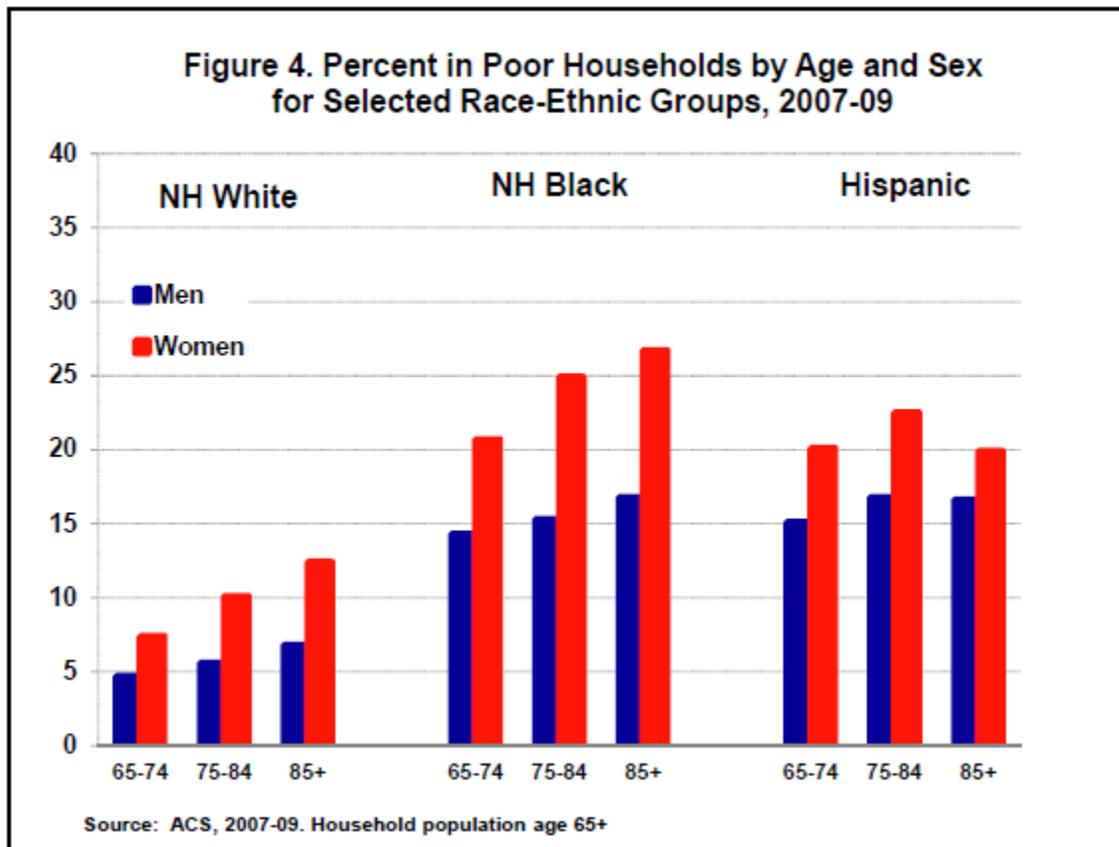
Older adults have made significant gains in their economic well-being compared to the younger population. Recent evidence illustrates a rise in wealth inequality between younger and older adults over a nearly 30 year period. Between 1984 and 2009, the median net worth of households headed by an adult younger than age 35 decreased by 68%, whereas the median net worth of households headed by those age 65 and older increased by 42% (Fry et al., 2011). At the same time, a growing share of households accumulated no or negative wealth. Young household heads were much more likely to have no wealth or to be in debt, compared to elderly household heads, even before the Great Recession (Fry et al., 2011). Growth in the wealth gap between the young and old is due to the interplay of the restructuring of the economy and increases in the age at which young adults leave school, enter the workforce, and marry.

The generational disparity in wealth was made starker by the financial and housing crisis of the Great Recession. As other authors in this volume have illustrated, the financial crisis hit

young adults especially hard. Young people were more heavily invested in homes and more heavily in debt whereas the portfolios of older households were much more diversified, thereby softening the blow of the crisis (Wolff, 2013). Homeownership rates among younger adults plummeted between 2001 and 2011, although the late baby boomers (age 45-54) and early baby boomers (age 55-64) also experienced a decrease in homeownership rates. Because housing wealth is one way that parents finance their children's college educations, the deterioration of housing wealth among those who are older is likely to make it more difficult for parents to provide this financial assistance to their increasingly needy adult offspring (Lovenheim, 2011).

Wealth portfolios among older adults are far from uniform. Among older adults, Whites have nearly three times as much wealth as Hispanics and African Americans (McKernan et al., 2013). This disparity results from long-term trends in income and wealth inequalities that accumulate with age (Avery and Rendall, 2002). Although the race-ethnic difference in homeownership narrowed in the 1990s, the housing crisis was more devastating for race-ethnic minorities than for Whites (Rosenbaum, 2012).

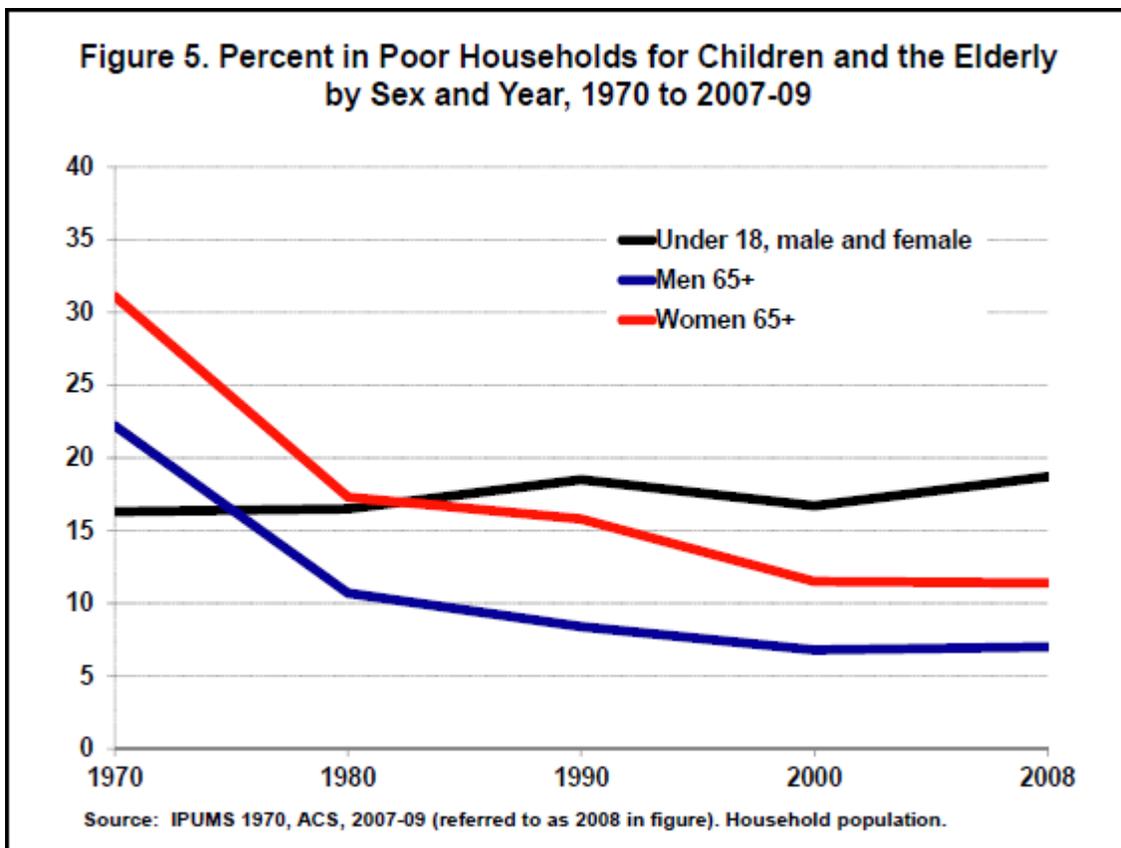
Race-ethnic differences in wealth are the flip side of the substantial race-ethnic differences in poverty. As shown in Figure 4, non-Hispanic Whites are less likely to be poor than are non-Hispanic Blacks and Hispanics. This race-ethnic difference characterizes the young old as well as the oldest old, although poverty increases with advanced age for both Whites and Blacks. Among Hispanics, poverty rates are higher for those 75-84 years old than for those 65-74, but poverty rates decline at age 85+ almost to the level of those 65-74.



Women are much more likely than men to be poor in old age. The gender difference in poverty rates among the elderly is evident for all three race-ethnic groups in Figure 4 and for all ages. This difference is due, in part, to differences in men’s and women’s marital status and living arrangements in old age, dimensions of the family experiences of the elderly that we examine below. A comparison of gender and race-ethnic differences highlights the deep economic disadvantage of Blacks and Hispanics. Minority men are much more likely to be poor than White women of any age.

Poverty in old age should be viewed in the context of the long-term improvements in the economic welfare of the elderly and the relative deterioration of the economic welfare of children. In 1970 the elderly were much more likely to be poor than were children, with about

16% of those under 18 living in poverty compared to 27% of those at least 65 years old. By the end of the period, almost 19% of children were poor compared to slightly less than 10% of the elderly (not shown). Figure 5 shows that, although both elderly men and women experienced a reduction in poverty, elderly women's higher poverty rates persisted across the decades from 1970 to 2007-09.³ The data in the figure also suggest that the poverty gap between older men and women may have declined slightly in the most recent period, perhaps due to increases in older women's employment.

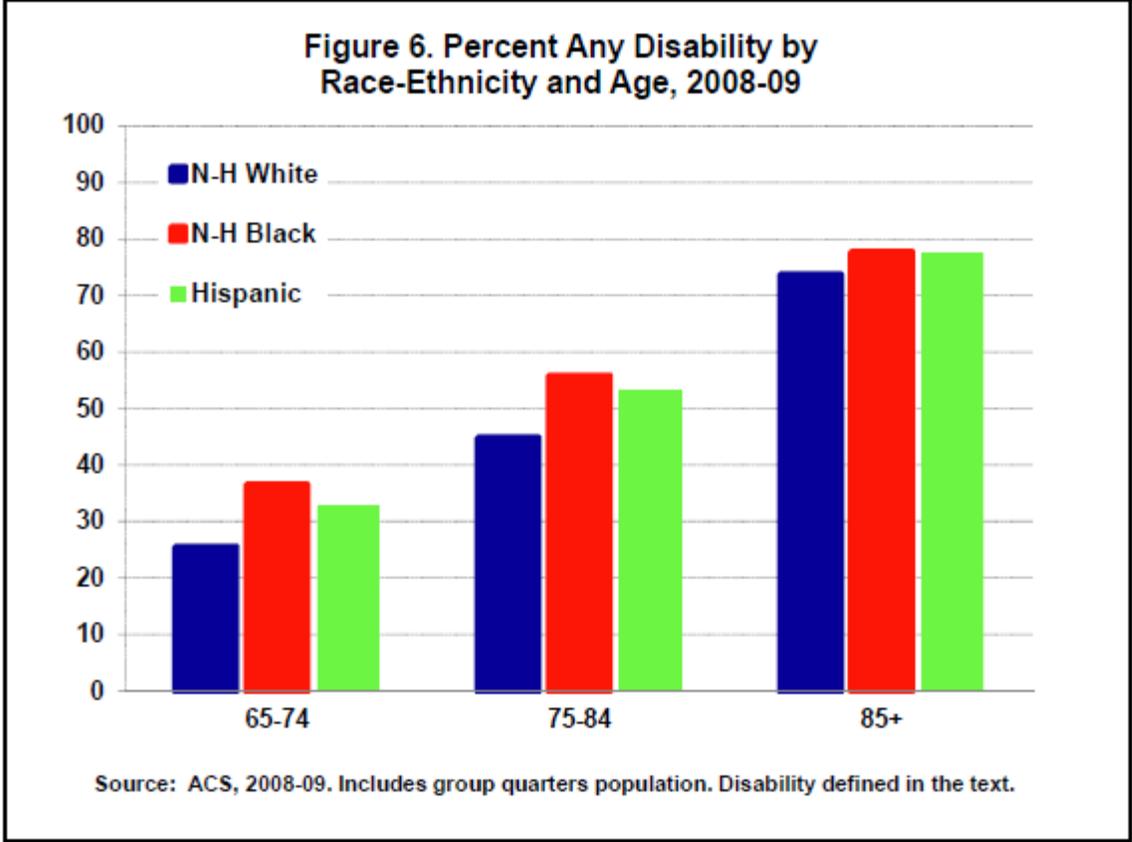


³ There are no gender differences among children because boys and girls have very similar living arrangements in childhood.

Healthy aging and disability

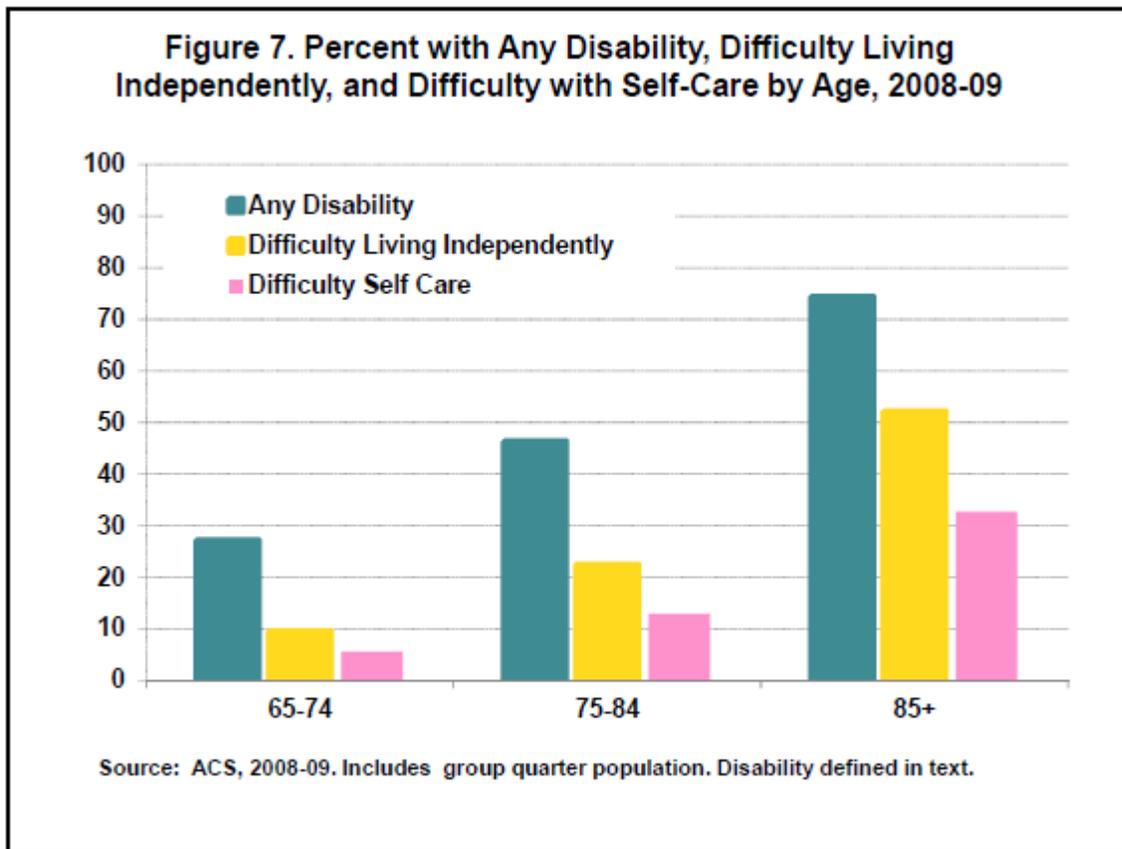
Along with improvements in the economic welfare of the elderly have come advances in health and physical well-being. A 2009 review concludes that at least before age 85, individuals are physically healthier and better able to cope with infirmities as a result of technological advances than ever before (Christensen et al., 2009). But even with these improvements in the health of the elderly, disabilities increase with age. Figure 6 shows the percent of the elderly who have any disabilities by age and race-ethnicity.⁴ Disabilities include: cognitive problems, ambulatory problems, difficulty living independently, difficulty caring for personal needs (bathing, dressing, etc.), vision problems, and hearing problems. Regardless of race-ethnicity, the percentage of those with disabilities increases with age. Over 70% of those 85+ years old have at least one disability, roughly twice as high a percentage as among those 65-74 years old. Hispanics and African Americans are more likely to have at least one disability than Whites until the oldest age group when the disability rates are very similar. This race-ethnic similarity is consistent with race-ethnic differences in life expectancy, which also tend to narrow with age (Pollard and Scommegna, 2013).

⁴ We combine disability data from the 2008 and 2009 ACS. As noted, the 2007 ACS asked different questions about disability than in 2008 and 2009.



Family Contexts and Living Arrangements

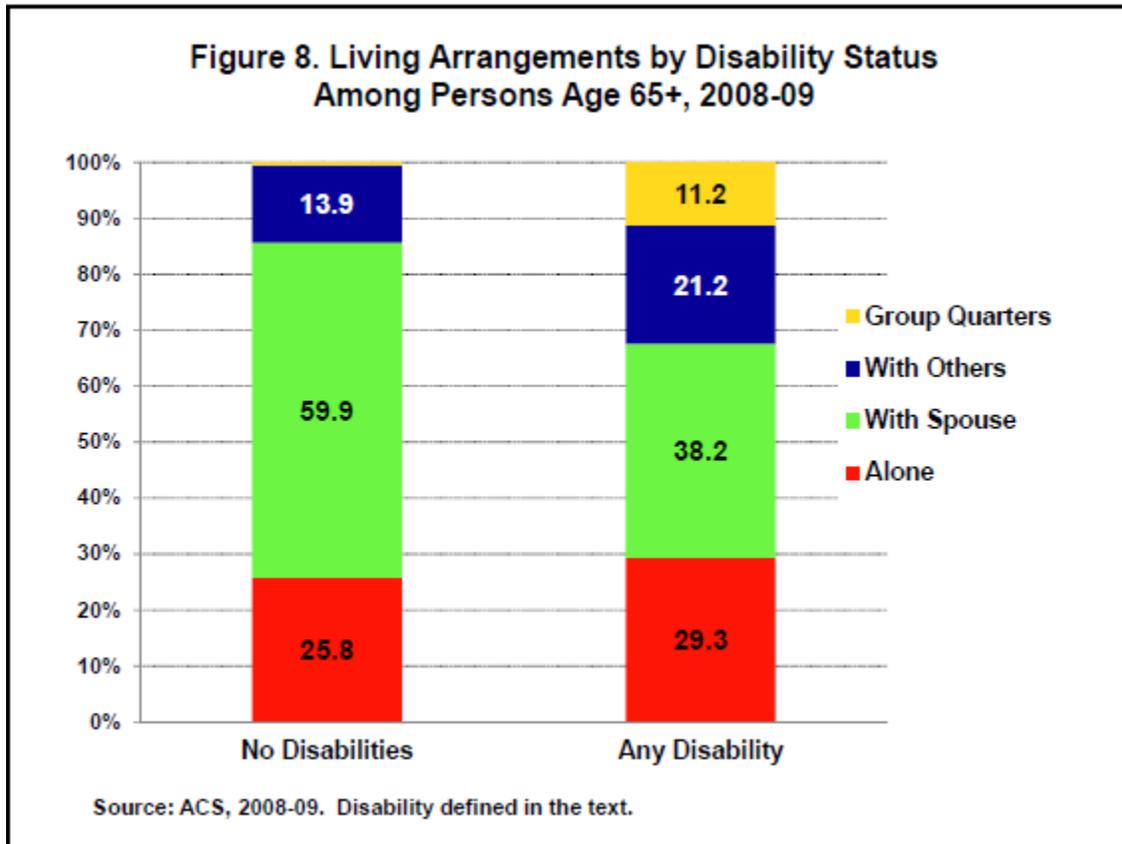
Individuals go through life as members of families – the families into which they are born and raised and the families they form as adults. Thus, it is essential to consider the U.S. elderly as family members as well as individuals. The family is a potential safety net in which family members can help each other to alleviate problems of poverty and disability. The likely importance of living with family members for the welfare of the oldest old is evident in Figure 7. As in the previous figure, the percentage with any disability increases with age. Over half of those 85 years old or older have difficulty living independently, and nearly a third say they have trouble with personal care.



All but 5% of older Americans live in households rather than institutions or other group quarters.⁵ Just over a quarter of those age 65+ live alone (not shown). Disability increases the chance that an older person will live in an institution or other type of group quarters (most who live in group quarters are in institutions). Eleven percent of those with a disability live in group quarters, compared to less than one percent of those without any disability, as shown in Figure 8. The percentage of the elderly who live alone is very similar for those with a disability and those

⁵ According to the Census Bureau (2010): “A group quarters is a place where people live or stay, in a group living arrangement, that is owned or managed by an entity or organization providing housing and/or services for the residents. This is not a typical household-type living arrangement. These services may include custodial or medical care as well as other types of assistance, and residency is commonly restricted to those receiving these services. People living in group quarters are usually not related to each other. Group quarters include such places as college residence halls, residential treatment centers, skilled nursing facilities, group homes, military barracks, correctional facilities, and workers’ dormitories” (U.S. Bureau of the Census, 2010; http://www.census.gov/acs/www/Downloads/data_documentation/GroupDefinitions/2010GO_Definitions.pdf). Also see Marton and Voss (2010).

without any disabilities. Those with disabilities who live alone depend on family members, particularly adult children – usually daughters – for assistance (McGarry, 1998). We consider intergenerational assistance below.



Older women are much more likely to live in an institution or other group quarters than older men (not shown). Older women also are more likely to live alone than men, in part because women survive their spouses due to women’s younger age at marriage and greater life expectancy. This gender difference in living arrangements suggests that compared to older men, older women may have a greater need for help from their adult children.

Table 2 shows the sex difference in marital status by age and year from 1970 to the present. In each year women are more likely than men to be widowed. By 2007-09, 43% of

older women were widowed compared to only 14% of older men. Among the oldest old, more than three quarters of older women are widowed compared to just over a third of older men (not shown).

	Men					Women				
	1970	1980	1990	2000	2007-09	1970	1980	1990	2000	2007-09
Married										
Spouse present	68.3	72.8	72.8	70.0	68.2	33.6	35.2	37.1	37.8	38.5
Spouse absent	2.7	2.1	2.6	3.9	3.2	1.7	1.2	1.5	4.1	2.0
Unmarried										
Widowed	17.0	14.6	13.9	13.8	13.5	52.3	51.8	49.4	45.3	42.5
Sep/divorced	4.6	5.0	6.0	8.0	10.5	4.2	5.2	6.6	8.5	12.4
Never married	7.5	5.5	4.7	4.4	4.7	8.2	6.6	5.4	4.3	4.6
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

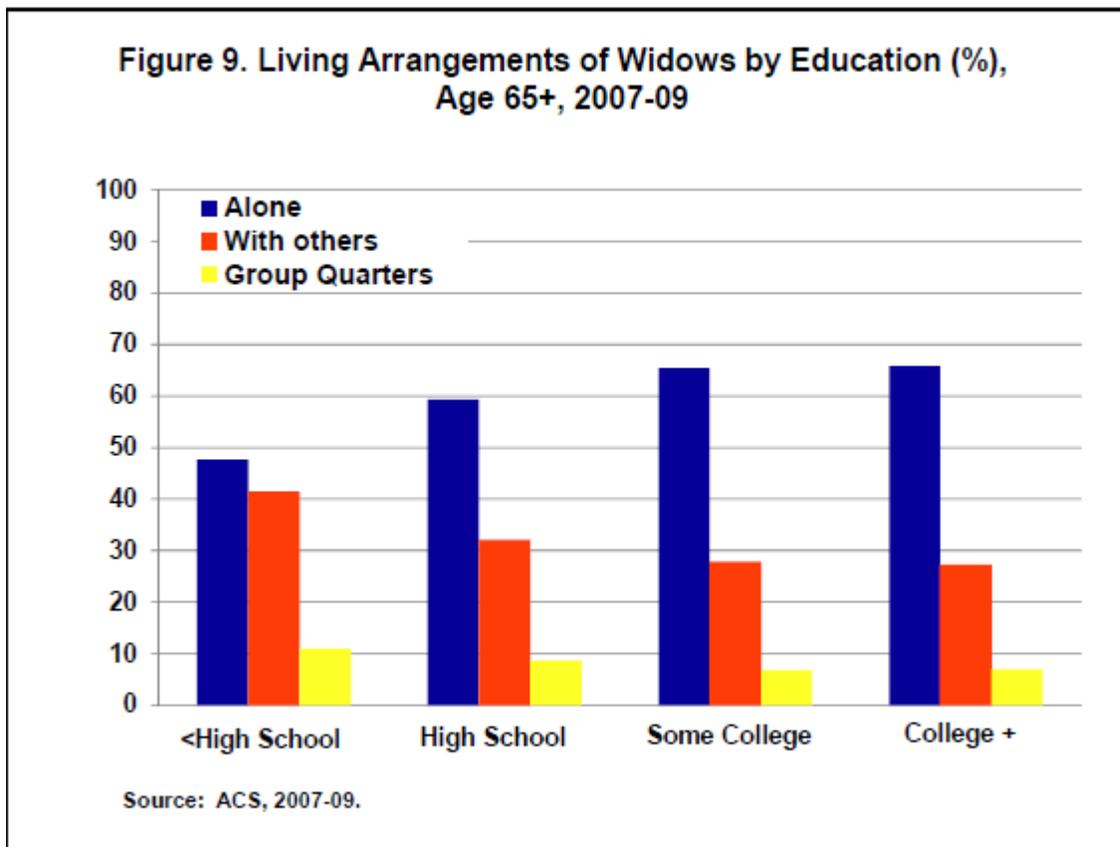
Source: IPUMS, 1970, 1980, 1990, 2000. ACS 2007-09.
 Note: Includes individuals living in group quarters. Percentages are weighted.

The aging of cohorts who experienced the rise in separation and divorce rates during their prime adult years is reflected in the gradual increases in the percentage of older Americans who are currently separated or divorced. In 1970, about 4% of the elderly were currently separated or divorced. By 1990, 6% were separated or divorced, and by 2007-09, almost 12% were separated or divorced (not shown). Table 2 shows that this increase occurred for both women and men.

These current statuses understate the implications of the rise in divorce for older persons' family lives because many of those who divorced have remarried.

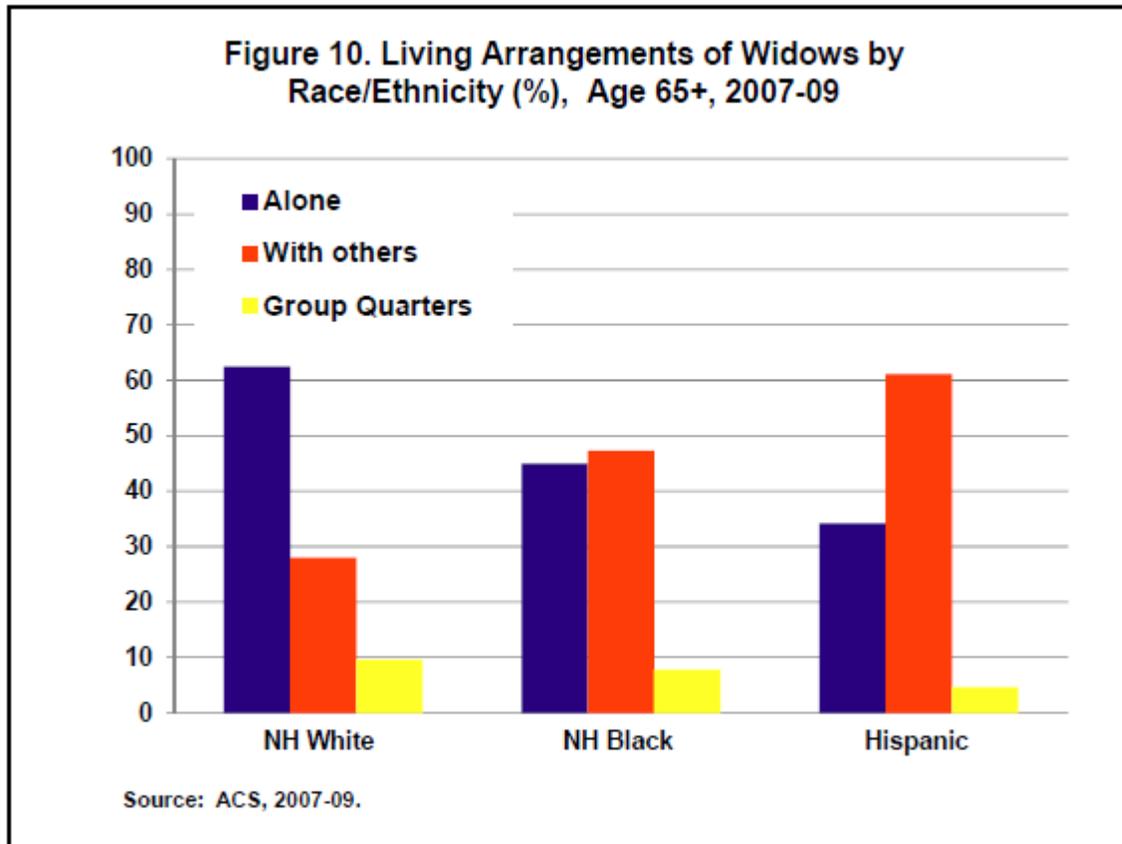
Compared to married parents, elderly parents who have lost a spouse are more vulnerable both in terms of needing time assistance and financial assistance from adult offspring. Spouses are usually the first line of defense and primary caregiving when an older person is disabled or experiences health problems (McGarry, 1998). Marriage is also associated with greater wealth and higher income, both early and late in life (Zissimopoulos et al., 2013).

When they lose their spouse, most widowed elderly persons live alone. Figure 9 shows that widows are more likely to live alone in their own households than with others or in group quarters or institutions. The apparent preference for living alone is evident regardless of how much education the widow has. However, among widows with some college or a college degree, a higher percentage live alone than among those with a high school education or less. Those without a high school degree are more likely to live with others (42%) than widows with higher levels of schooling (27-32%). The education difference in coresidence is also evident among those who are divorced or separated (not shown).



There are race-ethnic differences in living arrangements among widows that may be correlated with socioeconomic differences and cultural rules about intergenerational coresidence

(Burr and Mutchler, 1999). Close to 63% of White widows live alone compared to 45% of Black widows and only 34% of Hispanic widows (Figure 10).



Thus far we have focused on marital status as an indicator of whether or not an individual has a partner who helps share expenses and may provide care. This ignores that cohabitation has become increasingly common among the elderly, in part due to cohort replacement (Bumpass and Sweet, 1989, 1995), and in part due to increases in rates of cohabitation at all ages (Waite, 1995). Members of the Baby Boom cohort, who experienced high rates of cohabitation in their earlier years, continue to cohabit at higher rates in old age than members of earlier cohorts. In 2009, 9% of those who were not currently married lived with a cohabiting partner (Lin and Brown, 2012). Most cohabitators are divorced rather than widowed, among cohabitators over age

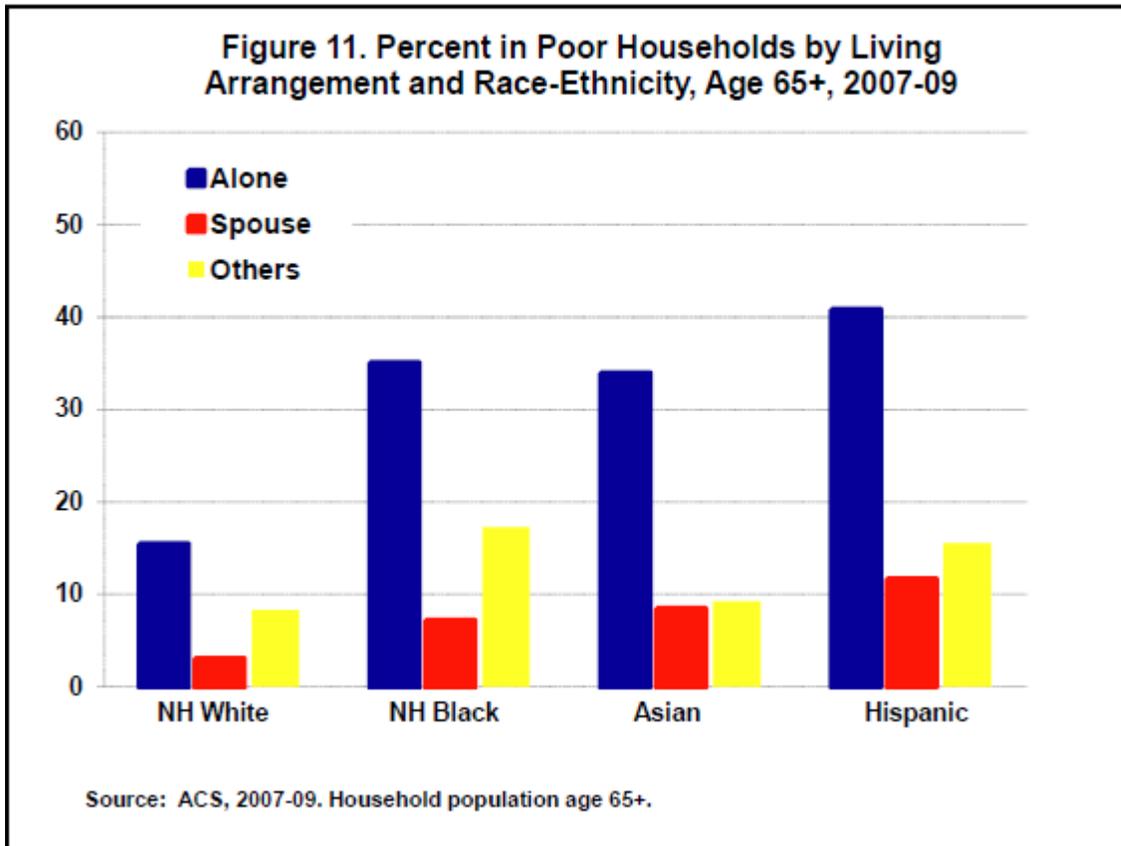
65 (Manning and Brown, 2011). Little is known about cohabitation in later life, compared to cohabitation in early and middle adulthood. It seems likely that cohabitation is even less of an economic partnership in old age when partners have legal and financial reasons to keep their finances separate (Manning and Brown, 2011). Consistent with the weaker commitment between cohabiting partners than spouses, elderly cohabiting partners also are less likely to be caregivers for each other if one is frail or disabled than elderly spouses (Noël-Miller, 2011).

Living with others is a way to share the expenses and work of maintaining a household. For those who do not have a spouse or cohabiting partner, living with adult children also has the potential to reduce poverty because household members pool their income. For example, adult children who face a difficult labor market may delay their departure or return to their parents' household to save money on rent (Kaplan, 2012; Qian, 2012; Ruggles, 2007). Or a divorced elderly mother may live with an adult child because the housing costs of living alone are too high for the mother to bear alone. Alternatively, intergenerational coresidence may reduce poverty if living with parents enables a single mother to work longer hours at her job and earn more money because her parents are providing child care.

Whatever the causal process, shared households are associated with lower poverty rates. Figure 11 shows that, compared to those who live alone, the elderly who live with a spouse⁶ or with others but not a spouse are less likely to be poor. This is true for all four race-ethnic groups shown. Those living with a spouse are least likely to be poor. Race-ethnic differences in poverty levels are still evident when those in the same types of households are compared. Even though Whites who live alone are more likely to be poor than Whites in other living arrangements, Whites who live alone are about as likely to be poor as Blacks and Hispanics who live with others. Only when they are compared to Asians who live with others are Whites who

⁶ This includes individuals who live with a spouse only and those who live with a spouse and others.

live alone more likely to be poor. If older people, like Americans of other ages, prefer to live alone (Klinenberg, 2012), these data suggest that the elderly may give up the privacy they value in exchange for a higher economic standard of living.



Intergenerational Ties and the Elderly: Assistance that Spans Household Boundaries

Parents and adult children maintain significant ties to each other even when they do not live together. They spend time together, provide each other with advice and emotional support, and share the scarce resources of time and money. Among parents at least 50 years old, nearly six out of ten saw one of their adult children (age 19+) at least weekly, according to Ward's (2008) analysis of data from the 1987-88 National Survey of Families and Households (NSFH).

More recent data from the 2002 International Social Survey Programme show that an even higher percentage of U.S. parents have contact several times a week with the child they see most often (Murphy, 2008, figure 3). Mothers are more likely to have frequent contact than fathers (Murphy, 2008), a likely consequence of cultural expectations that women manage family life as well as their greater attachment to adult children after divorce and remarriage.

Financial assistance and help that requires time are less common than other intergenerational ties (Fingerman et al., 2009). These transfers are a mechanism by which family members alleviate the hardships of life. In the United States, as in most developed countries, material assistance typically goes from parents to adult children rather than from children to parents (Eggebeen and Hogan, 1990; McGarry and Schoeni, 1995). In another study using NSFH data, adults were about four times as likely to have received \$200 or more from their parents in the past five years as to have given that amount to parents in the same period (17% vs. 4%) (Eggebeen and Hogan 1990, table 1). In a 1988 special module of the Panel Study of Income Dynamics (PSID) conducted around the same time as the NSFH, 18% of adults reported that their parents gave them a financial transfer of at least \$100 in the past year, compared with 3% who reported that they gave their parents a financial transfer (Schoeni, 1997, table 3). Although these data are from surveys conducted twenty-five years ago, they still provide useful evidence that the direction of financial transfers is largely from parents to adult children.

Table 3 shows more recent estimates of whether or not an adult child received financial support worth \$100 or more in 2011 based on data from the June 2012 Survey of Consumers (SC).⁷ In the SC, just over a quarter of adult children who are at least 25 years old received a financial transfer from their parents in the previous year. Among those who received a transfer,

⁷ The estimates in Table 3 are for individual adult offspring. The reports, however, come from parents who answered questions about transfers to each of their and their spouses' adult offspring. The data are converted to the child-level for easier interpretation.

the mean amount received was \$6,500. Adult children whose parents have a college education are more likely to receive money from their parents and, not surprisingly, the amount they receive is higher than for those whose parents who have a high school degree or less. This pattern is consistent with findings from other surveys, which show that parents who have more education or higher incomes are more likely to help adult children by giving them money than parents whose socioeconomic status is lower (Killian, 2004; McGarry and Schoeni, 1995; Wightman et al., 2013; Zissimopoulos and Smith, 2009). Within families, parents and children give financial transfers to alleviate relative economic hardship (Altonji et al., 1997; McGarry and Schoeni, 1995). A child who has lost his or her job may receive more than siblings who have more secure employment.

Table 3. Adult Child's Receipt of Financial Help in 2011 and Whether Parents Helped with Major Expenses Since Child Was Age 18, by Parents' Education				
	Parents' education			
	High school or less	Some college	College degree or more	All
Financial help in 2011				
Whether received \$100 or more from parents	20.7 ^b	21.2 ^c	36.6	25.6
Mean dollars received, if at least \$100	3,175 ^b	5,643	9,588	6,477
Standard deviation	4,982	17,527	20,240	16,256
Long-term financial help				
Educational expenses	21.0 ^{ab}	36.2 ^c	71.9	41.4
Housing	12.6 ^b	12.8 ^c	24.0	16.1
Other	19.5 ^b	24.8	32.6	25.2
Unweighted N	243	201	231	675
Notes: Adult children age 25+. Weighted data. Ns vary slightly by type of expense due to missing data. June 2012 Survey of Consumers.				
^a HS vs. Some College difference statistically significant $p \leq .05$.				
^b HS vs. College+ difference statistically significant at $p \leq .05$.				
^c Some College vs. College+ difference statistically significant at $p \leq .05$.				

Divorce and remarriage reduce financial assistance. Compared to married parents, parents in stepfamilies and divorced fathers are less likely to make financial transfers to adult children. These differences cannot be explained by the greater economic disadvantage of parents who have experienced family disruption (Eggebeen, 1992, Furstenberg et al., 1995; Killian, 2004). Instead, they may signal a weakening of ties between generations as a consequence of family instability.

In addition to providing short-term transfers, parents also give children major gifts or financial help to achieve important milestones in life, such as acquiring a college education or purchasing a home, which are often considered parts of the American Dream. The bottom panel of Table 3 shows the percent of adult children age 25+ whose parents gave them “any loans, gifts, or other support worth five hundred dollars or more to help with educational expenses, including tuition, room and board, and books” since the adult child was age 18. The SC data indicate that 41% of adult children received help from parents for educational expenses. There are substantial educational differences in who received help, with 72% of those whose parents had college educations receiving educational help from parents but only 21% of those whose parents had completed high school or less. Housing help also is more likely among the offspring of college-educated parents. Remarried parents and single parents are less likely to contribute to children’s schooling than are biological parents (Henretta et al., 2012; López-Turley and Desmond, 2011).

Time help between parents and adult offspring is more likely than financial support to flow in both directions, up and down the generational ladder. Adult offspring provide aging parents with practical assistance, such as help with errands, housework, and transportation. Mothers over age 75 are more likely to receive practical help from offspring than fathers, in part

because mothers are more likely to be unpartnered (divorced or widowed) than fathers (Logan and Spitze, 1996). In addition to practical help that offspring provide to parents who are relatively healthy, adult offspring provide significant care when unmarried parents are ill or disabled (McGarry, 1998). Daughters are more likely than sons to be caregivers to disabled elderly parents (McGarry, 1998; Pillemer and Suito, 2013). The disruption of attachment associated with family instability contributes to another gender difference: Adult children provide less help to frail divorced fathers compared to care they provide mothers or widowed fathers (Fingerman et al., 2012; Lin, 2008). Adult offspring who received financial transfers from parents earlier in adulthood are more likely to provide care to parents who later become disabled (Henretta et al., 1997).

Although adult children provide significant time assistance to parents when their parents reach advanced ages, time help – like financial help – is more likely to go from parents to adult children throughout most of life (Logan and Spitze, 1996). Parents provide help with housework and yard work but a major contribution to the next generation is their assistance with child care that the older parent provides to his or her grandchildren (Eggebeen, 1992). The next section considers older persons as grandparents.

Older persons as grandparents and what grandparents do

The experience of grandparenthood today is very different than in the past. Improvements in life expectancy mean that parents are much more likely to see their children become adults and have children of their own. In 1900, only one in five adults age 30 had at least one living grandparent, but by 2020, four in five will have at least one grandparent still alive (Uhlenberg, 2005). Not only have grandparents become more likely to know their grandchildren as young adults, but the grandparent role has acquired a new meaning because it is

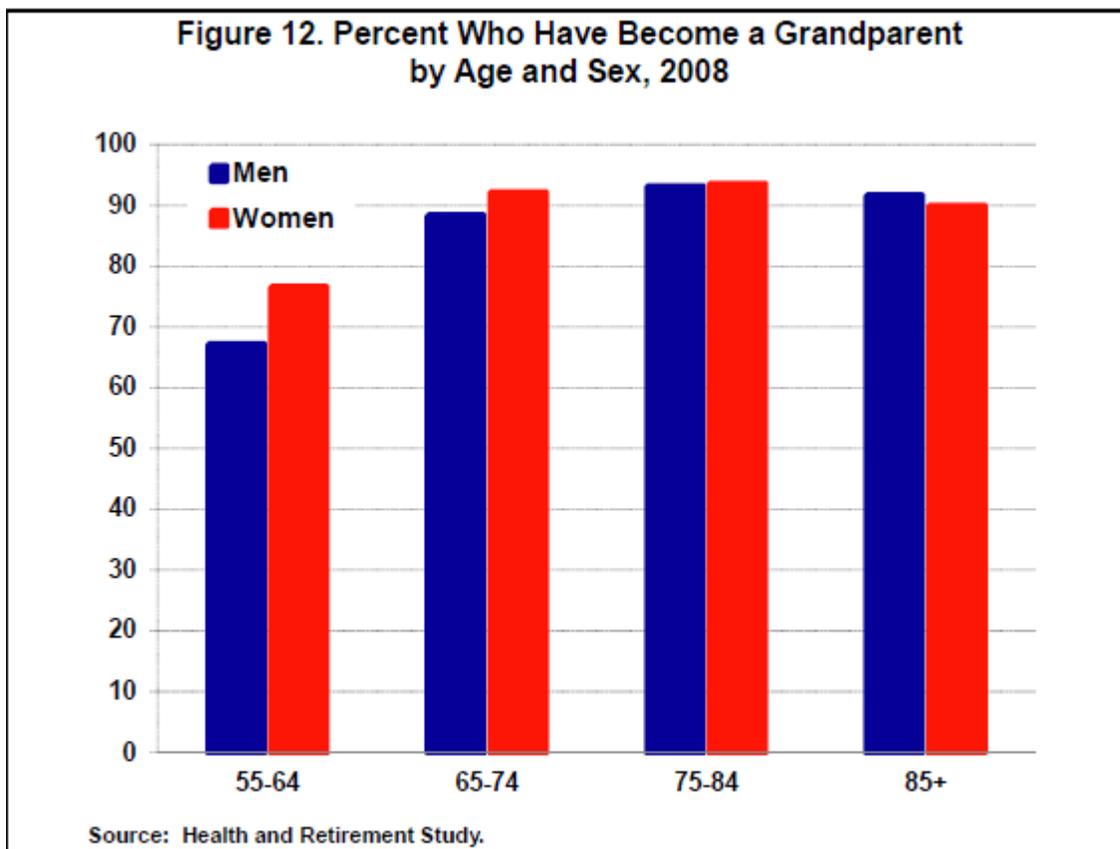
an increasingly distinct life stage. When families were larger, older offspring married and had children while their parents were still raising their younger siblings. Parents today are very unlikely to still have young children at home when they have their first grandchild (Hagestad and Lang, 1986). Thus, instead of combining the two roles – parent caring for young offspring and grandparent of young grandchildren – many of today’s older adults have finished raising their own offspring and can shape their role as grandparent without juggling responsibilities to their own young children.

As with a number of other aspects of U.S. family life, this broad brush depiction of grandparenthood as a separate life stage fits those who are highly educated and White better than those who are educationally disadvantaged or non-White. Differences in the timing of when individuals become parents and the number of children they have affects when they become grandparents. People who become grandparents at younger ages are likely to be healthier and able to be more physically active in helping their adult offspring and playing with grandchildren. On the other hand, becoming a grandparent at a young age means that the grandparent is likely to still be employed, and time spent providing child care for grandchildren may compete with paid employment. Age at grandparenthood also may affect the type of help that grandparents provide. Compared to those who are younger when they become grandparents, older grandparents are likely to have more financial resources available to transfer to grandchildren (directly or indirectly through their parents) and to substitute financial help for the more physically demanding child care assistance that younger grandparents are better able to provide (Silverstein and Marengo, 2001).

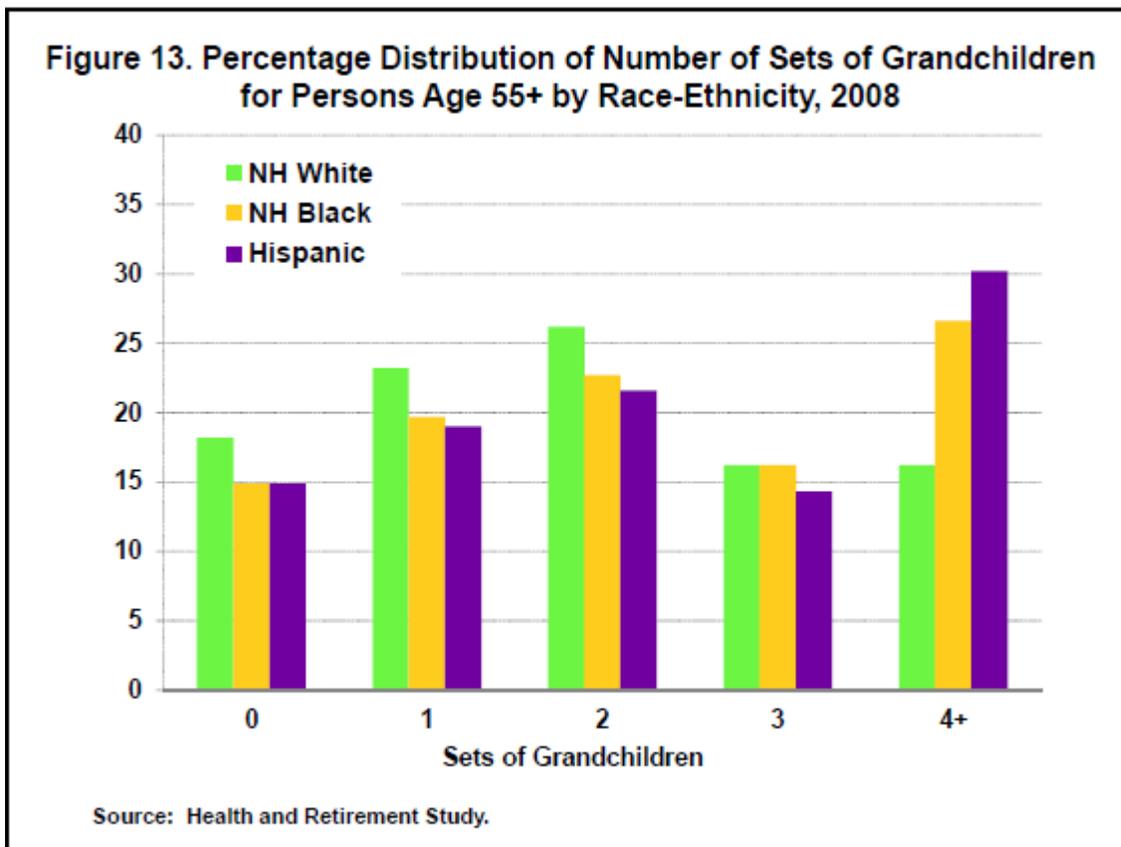
We first describe who is a grandparent using data from the Health and Retirement Study because census data on grandparents are restricted to grandparents who live with a grandchild or

who provide significant child care to a grandchild. Knowing who is a grandparent sets the stage for our discussion of how grandparents are involved in the lives of their grandchildren.

Figure 12 shows the percentage of men and women who have become grandparents by a given age. By the time they are 55-64 years old, more than three quarters of women and two thirds of men have become grandparents. Over 90% of those who are at least 65 years old are grandparents. The earlier timing of childbearing among Blacks and Hispanics contributes to their earlier transitions to the status of grandparent. By ages 55-64, 80% of non-Hispanic Blacks and Hispanics have become grandparents, compared to only 70% of non-Hispanic Whites. Among those at least 85 years old, there are only small race-ethnic differences in who is a grandparent (not shown).



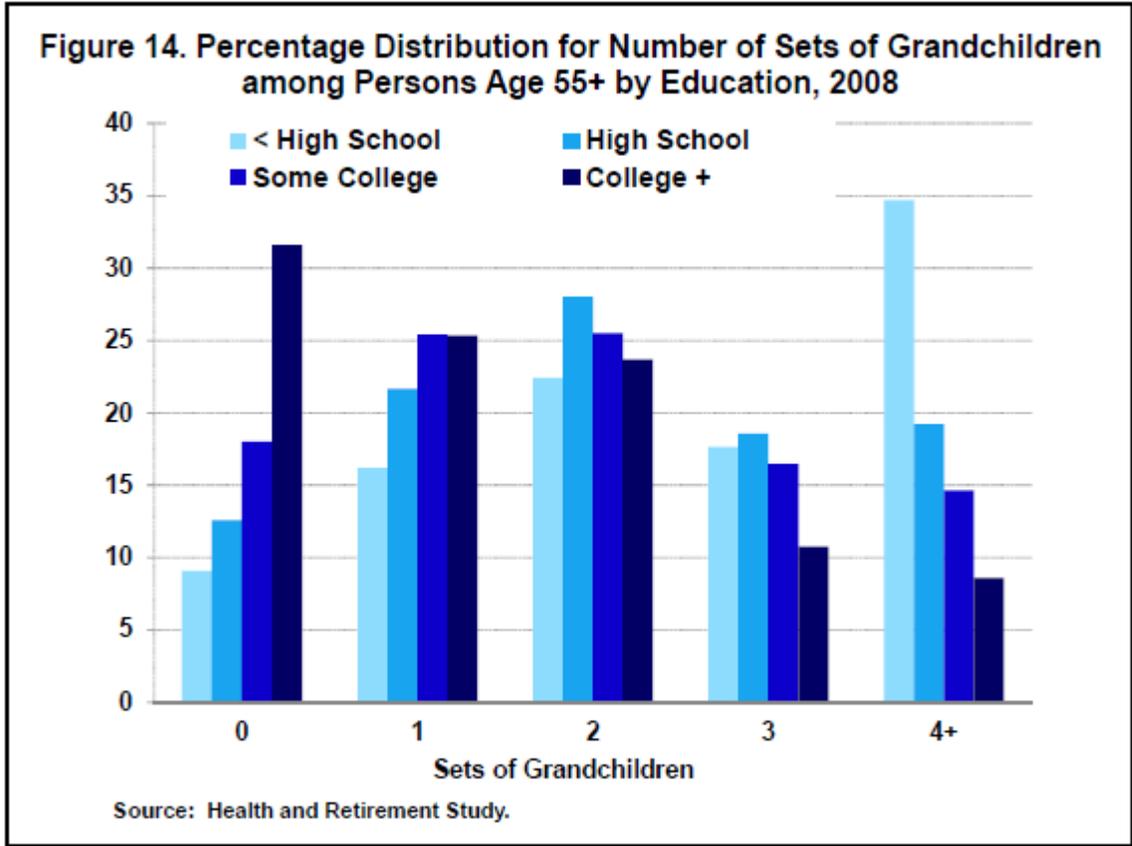
Another way to think about grandparenthood is to consider how many of a person's offspring have produced grandchildren, that is, how many sets of grandchildren a person has. Figure 13 shows the number of sets of grandchildren older adults have by race-ethnicity. Compared to Whites, African Americans and Hispanics are much more likely to have at least four sets of grandchildren, among those age 55 or older. Approximately 30% of Hispanics have at least four sets of grandchildren, almost twice as high a percentage as for Whites (16%). The race-ethnic difference is also evident when one examines the distribution separately for women and men (not shown).



Not surprisingly given the education differences in family patterns early in life, there also are education differences in the number of sets of grandchildren older people have. Those who

have the least formal schooling are most likely to have at least four sets of grandchildren, as shown in Figure 14. Although the younger ages at which less educated people become grandparents contributes to this differential, the smaller family sizes of the well-educated account for more of the difference. By ages 75 and older, when most older persons have become grandparents, 38% of those with less than a high school education have at least four sets of grandchildren, but only 19% of college educated older adults have this many sets (not shown).⁸ Having more sets of grandchildren increases the chance that a grandparent will spend time with any grandchild, but it may diminish the amount of time the grandparent devotes to each grandchild (Uhlenberg and Hammill, 1998). By the same token, grandparents with more grandchildren may invest less money in each grandchild, compared to grandparents with fewer grandchildren.

⁸ We compared the zero-order association between education and number of sets of grandchildren to the net association between education and number of sets of grandchildren, adjusting for number of offspring in OLS regressions. For both age groups, those aged 55+ and those aged 75+, including the number of offspring reduced the association between older adult's education and number of sets of grandchildren. The sizes of the coefficients for education were reduced more when we adjusted for number of offspring for the 75+ age group than for the 55+ age group (not shown). This supports the view that number of offspring is a primary mechanism contributing to different numbers of sets of grandchildren by late in life. That other factors contribute to the number of sets of grandchildren is evident when one considers the subset of older persons who have not become grandparents by age 75+. Only 25% of these people are childless (not shown). The implications for older persons' well-being of never becoming a grandparent or of becoming a grandparent very late in life are an important topic for future research.



For many families, grandparents are an important part of the family safety net. Grandparents affect grandchildren’s social mobility, even after taking into account parents’ own social class, according to evidence from the United Kingdom (Chan and Boliver, 2013). Grandparents who provide financial assistance to their adult children enhance their grandchildren’s financial well-being as well. Another important mechanism through which grandparents affect grandchildren’s socioeconomic well-being is through wealth transfers, for instance when grandparents help offspring with housing down payments (Cox and Stark, 2005).

Grandparents also regularly provide child care for preschool-age grandchildren, as noted above. In fact, some young couples decide where to live based partly on proximity to a grandmother who may provide child care (Compton and Pollak, 2011). Recent estimates from a

nationally representative sample of older adults found that 28% of grandparents provided at least 50 hours of care per year for grandchildren with whom they did not live (Luo et al. 2012, 1153). Approximately three out of ten preschoolers are in their grandparents' care when their parents are at work or in school (Laughlin, 2010, table 2). Responding to in-depth interview questions, grandparents say that they view helping with child care as an important family responsibility (Harrington Meyer, 2010). Grandparents provide this service without charge (Harrington Meyer, 2010), but substituting paid child care for the care that grandparents provide would be expensive for adult offspring.

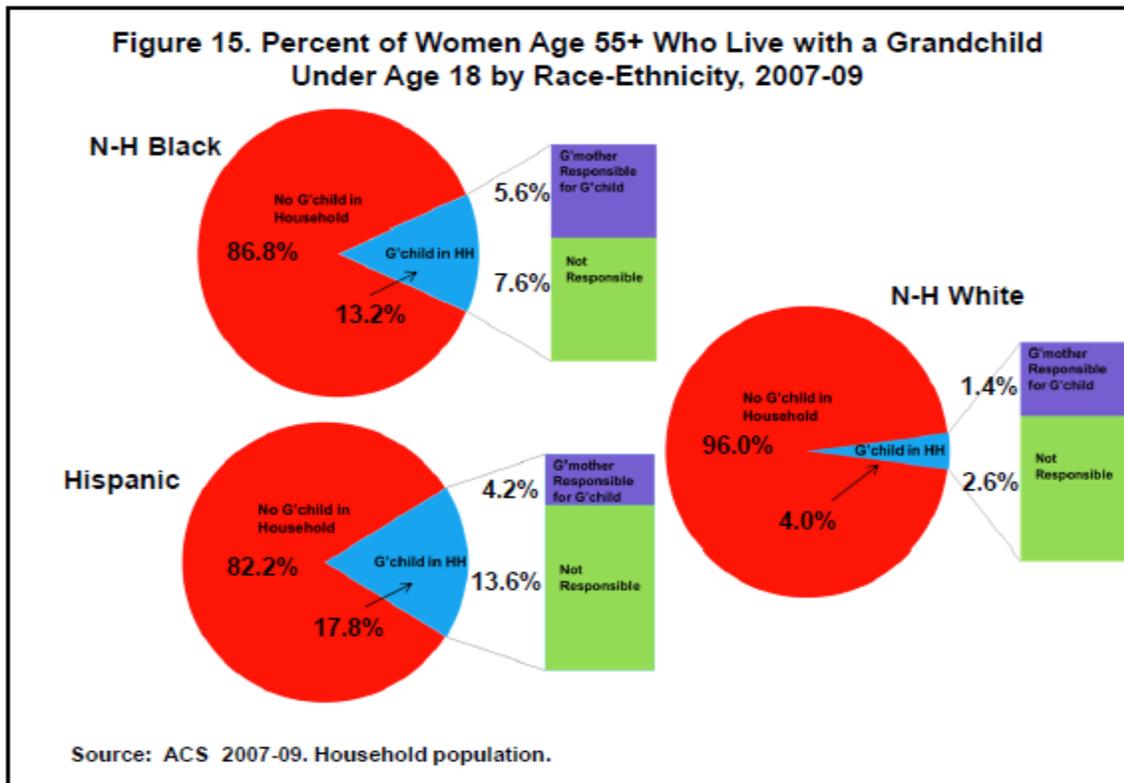
Some grandparents provide even more assistance when they live in the same household as their grandchildren. We focus on grandmothers in this section because grandmothers have closer ties to grandchildren than grandfathers do (Uhlenberg and Hammill, 1998). As a group, grandfathers' ties to grandchildren are weaker owing to some fathers' loss of contact with their offspring (the middle generation) after separation or divorce. In addition, grandmothers' greater life expectancy provides more potential for interaction with grandchildren.

Among women 55 years old or older, 7% were living in the same household as at least one of their grandchildren under age 18 according to data from the 2007-09 American Community Survey (ACS).⁹ Sharing a home provides the generations with opportunities for frequent interaction. For almost one third of grandmothers who live with a grandchild, it is more than simply sharing a home. These grandmothers bear primary responsibility for the grandchildren in their home.¹⁰

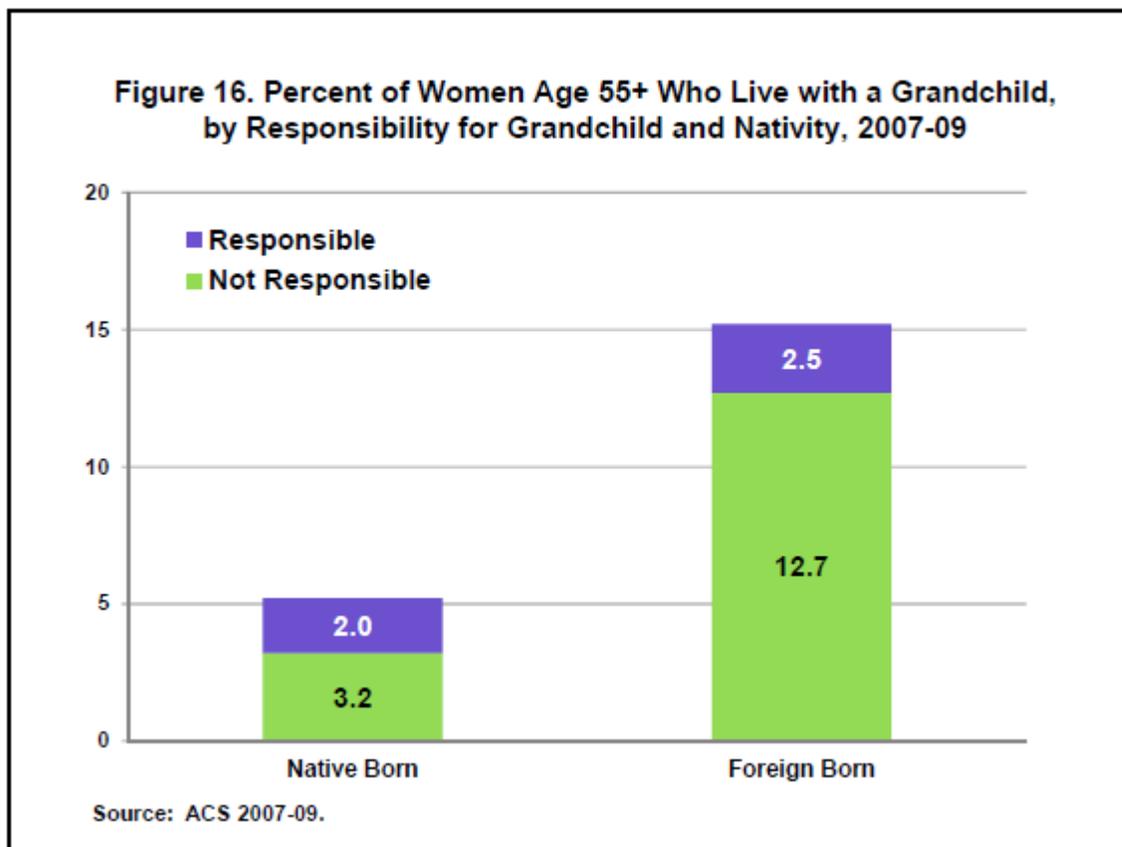
⁹ Census data do not identify individuals who are grandparents unless there is a grandchild in their household. Therefore we describe the percentages of individuals not the percentages of grandparents who coreside.

¹⁰ The ACS asks if the grandparent is "currently responsible for most of the basic needs" of the grandchild(ren) under age 18 who live in the household.

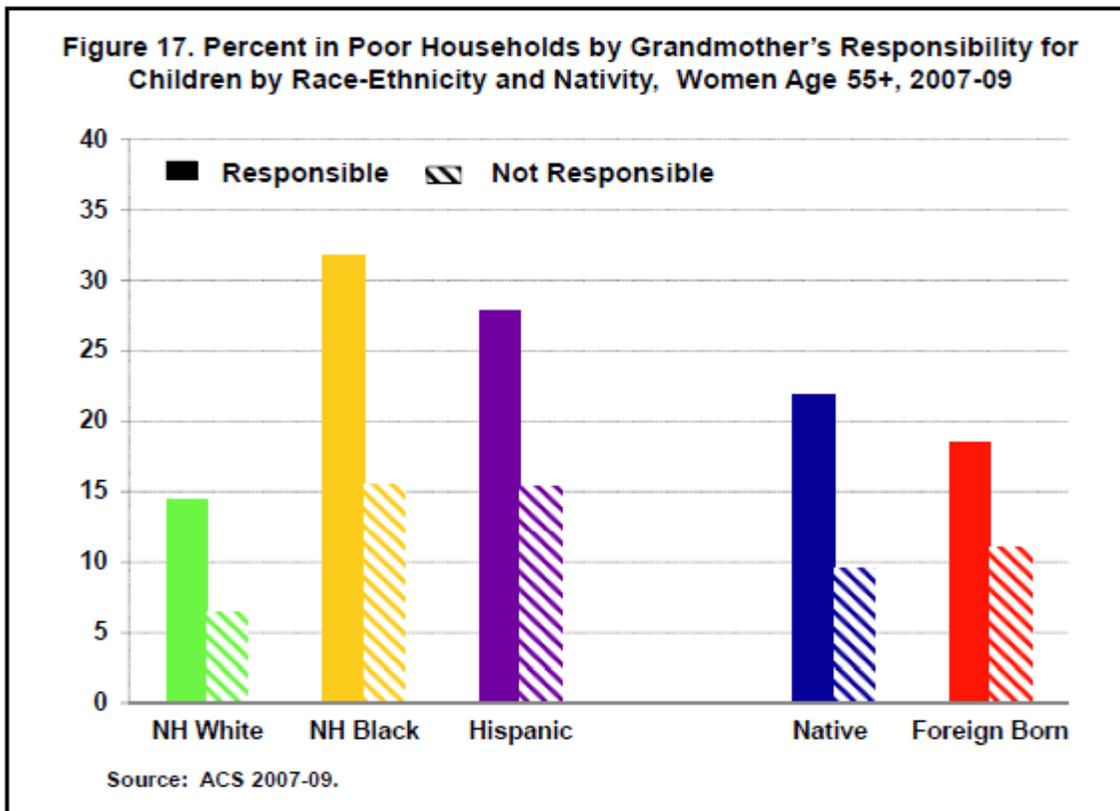
African American and Hispanic women are much more likely to live with a grandchild than are non-Hispanic White women, as shown in Figure 15. Among non-Hispanic Blacks, 13% of women 55 years old or older live with a grandchild under age 18, as do 18% of Hispanic women, compared to only 4% of non-Hispanic Whites, differences that are statistically significant. African American grandmothers who live with a grandchild are more likely to bear primary responsibility for that grandchild’s care, compared to other grandmothers who live with a grandchild. Compared to Hispanics, the greater responsibilities of African American grandmothers are because their homes are less likely to include the grandchild’s parents. Among African Americans, 27% of grandmother-grandchild households are two-generation households, but 11% of Hispanic grandmother-grandchild households include only two generations (not shown). (See also Luo et al., 2012, for a similar result using HRS data.)



In later life foreign-born women are more likely to live with a grandchild than native-born women. Figure 16 shows that 15% of foreign-born women age 55 and over live with a grandchild, compared to 5% of the native born. Among those who live with a grandchild, foreign-born grandmothers are much less likely to have primary responsibility for the children in their households than native born grandmothers. This is because native-born grandmothers are about three times as likely to live with a grandchild in a two-generation household (22%) – that is, a household that “skips” the parent generation – compared to foreign-born grandmothers (7%) (not shown). This is consistent with research suggesting that grandmothers in immigrant families are brought to the United States to help with child care so that adult children can work outside the home (Treas and Mazumdar, 2004).



Grandmothers who bear primary responsibility for the grandchildren in their households face the difficult challenge of acting as a parent at a time in life when they may feel that they have already finished the tasks of hands-on childrearing. The responsibilities of childrearing also may limit their opportunities for paid work, contributing to financial hardship. Those that do step in often do so involuntarily (Pebley and Rudkin, 1999). Grandmothers who care for their grandchildren in skipped-generation households, those that exclude the middle parent generation, are disadvantaged economically (Hughes et al., 2007). Figure 17 shows the much higher poverty rates of grandmothers who have responsibility for grandchildren in their households compared to grandmothers who do not have primary responsibility. For each race-ethnic group, those who have primary responsibility are about twice as likely to be poor. The difference in poverty rates for the foreign born by whether the grandmother has primary responsibility is slightly less than for the other comparisons.



In addition to their economic disadvantages, grandmothers who have responsibility for grandchildren in skipped generation households are in worse health than other grandparents. The difficulties of raising a grandchild may cause grandmothers to suffer further health problems (Hughes et al., 2007). In addition, grandparents who take on parental roles are more frequently afflicted with mental health stress than those who do not (see Lumpkin, 2008, for a summary). These problems of the oldest generation are associated with problems in the youngest generation. Grandchildren raised by grandparents have worse health and academic outcomes than children raised in other family types, and many of these family type differences remain after adjusting for the socioeconomic disadvantages of grandparent-maintained families (Bramlett and Blumberg, 2007). Although some of the negative outcomes may be attributable to their parents' problems – poor health or drug or alcohol problems – that bring grandparents in to rear their grandchildren, it is troubling that the most vulnerable of the youngest generation are being raised by an oldest generation that also is so vulnerable.

Although longer life spans have afforded older adults the potential to develop greater ties across generations, high rates of family instability over the past several decades contribute to great variability in how often this potential is reached. On one hand, biological grandparents may play an especially important supportive role in the lives of grandchildren whose parents divorce, at least among grandparents on the custodial parent's side of the family (Cherlin and Furstenberg, 1986; Kennedy and Kennedy, 1993). On the other hand, remarriage introduces step grandparents who may be weakly connected to step grandchildren. Step grandparents enter the family when the eldest generation remarries or when the middle generation remarries and the stepparent in the middle generation brings his or her parents into the remarried family as new

step grandparents. Regardless of how the step grandparent enters the family, the quality of the step grandparent-grandchild relationship depends largely on how well the middle generation gets along with the youngest and oldest generation (Sander and Trygstad, 1989). Thus, grandparents' ability to play an important role in the lives of their grandchildren faces new challenges in light of the family changes since the 1970s.

Conclusion

This report provides a broad-brush view of the individual characteristics and family lives of the elderly in the United States. Today, the U.S. elderly are more ethnically and racially diverse than they were in the past. Large shares of those who are non-White are also foreign born, originating from countries in Asia and Latin America, unlike the older European immigrants who preceded them. In the twenty-first century the elderly are better positioned than they were in the past. Older persons are on average wiser (or at least better educated), wealthier and healthier than ever before. Older persons are more likely to have at least a high school education, and increasing percentages of the elderly are college educated. The elderly also have more economic resources than in the past, and as a result, they are less likely to live in poverty. Although men tend to leave the labor force earlier and women later than in previous decades, these labor force patterns are shifting in response to improvements in health and increased longevity as well as changes in marriage and expectations about joint leisure and Social Security eligibility rules. The old-age years are truly the golden years for large segments of the U.S. population.

For some, however, the phrase “golden years” is a less apt description. Those without a college education witnessed a drop in real earnings since the 1970s. This affected race-ethnic

minorities and the foreign born in ways that are reflected in dramatic differences in poverty rates across groups in later life. Non-Whites and immigrants are poorer than Whites and the native born at all ages. Disability also is more common for minorities until very late in life, when differences among groups are less apparent. Women are more likely to be poor than men are, and much of that is due to differences between women's and men's family roles.

A demographic portrait of the elderly would be incomplete without considering the broader family contexts in which they live. Their lives and the lives of their offspring have been affected by sweeping changes in family life due to high rates of divorce, cohabitation, nonmarital childbearing, and the formation of stepfamilies. The demographic changes of the past 30 to 40 years are now only beginning to be reflected in the lives of the elderly. More older adults today are divorced or have experienced marital disruption at some point in their lives. Women are more likely than men to be unpartnered in old age, both because of divorce and because of widowhood. Still, most older Americans either live with a spouse, on their own, or with others. Very few are institutionalized. Older persons who are disabled are more likely to live in what the census calls "group quarters" or institutions, but even among those with disabilities, institutional living is uncommon.

Family members help each other alleviate economic hardship by combining households across generations (Anderson, 1971; Hareven, 1990; Pew Social and Demographic Trends, 2010). Coresidence is a unique form of intergenerational transfer because it necessitates a loss of privacy. For those who have a history of family instability and repartnering, intergenerational coresidence may be a less appealing way for older parents and offspring to help each other because they lack the emotional closeness that makes the loss of privacy more tolerable (Seltzer et al., 2013).

Another demographic change has less ambivalent implications for intergenerational ties than the changes in marriage and partnerships. Increasing longevity creates greater possibilities for ties across generations, whether or not the generations live in the same household. Older parents and offspring see each other frequently. They also help each other with money and time, two scarce resources. These transfers between generations tend to flow downward to adult children and sometimes grandchildren. Parents who are highly educated are more likely than parents who are less well educated to give money to their adult offspring in the short-term, as well as for important investments, such as for college expenses and housing.

The economic restructuring and loss of manufacturing jobs has increased the younger generation's need for assistance from parents most among those whose parents are least equipped to provide it because they too have less education, income, and wealth than their age peers. At the same time, families who are educationally disadvantaged, Blacks, and members of some Hispanic groups have experienced higher rates of family instability than their more advantaged counterparts. Family disruption increases the need for financial and time help from parents but simultaneously weakens the bonds that connect parents and offspring to each other. As a consequence, those most in need of help may find their family safety net less durable than in the past.

That the family safety net is still functioning is evident in grandmothers' willingness to become primary caregivers to grandchildren whose parents cannot look after them. Even though custodial grandmothers have more health problems and experience higher rates of poverty than other grandmothers who live with a grandchild, they continue to care for the youngest generation. This is a dramatic example of the important role that older persons play in the family safety net. Yet, diversity in the needs and family histories of the old-age population and their

offspring point to places where the private family safety net – largely supported by older parents – may be fraying or stretched thin. As the U.S. population ages, policy debates about Social Security and Medicare, programs that support the elderly, should consider the changing characteristics of the old-age population and the family contexts in which they live.

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Data Appendix

Several data files are used in this study, including the 1970, 1980, 1990, and 2000 Decennial Census data; 2007, 2008, 2009 American Community Survey data and data from the 2008 wave of the Health and Retirement Study. Below is a description of the data and issues that were addressed in compiling and analyzing the data.

Decennial Census

Decennial census data were extracted from the Public Use Microdata Series (PUMS) files via the Minnesota Population Center at the University of Minnesota (Ruggles et al. 2010). 1970 data are derived from the 1% state fm2 file; 1980 data are extracted from the 5% state file; 1990 data are extracted from the 5% state file and 2000 data are taken from the 5% sample.

American Community Survey

American Community Survey (ACS) data were also extracted from the Public Use Microdata Series (PUMS) files. We use ACS data for the period at the end of the decade because it includes significantly more information than the 2010 decennial census.

Health and Retirement Study

Many of the socio-demographic trends that affect the experience of old age in the United States are trends that affect older persons' relationships with people outside their households. High divorce rates and rates of (re)partnering through cohabitation and remarriage mean that individuals increasingly have step and quasi-kin ties that connect them to people outside the household. Similarly, the decline in fertility means that older persons will have fewer children in whom to invest and who might provide care for them. Co-residence of parents and adult children is relatively uncommon in the United States (Ruggles, 2007; McGarry and Schoeni, 2000), but the parent-child relationship is still socially significant and often marked by transfers of time and money. Because Census data do not include information about family relationships outside the household, we supplement our analysis of Census data with data from the Health and Retirement Study (HRS), a prospective longitudinal survey of the U.S. population over age 50 <http://hrsonline.isr.umich.edu/>. The HRS was begun in 1992, and because it samples new individuals over 50 every other year, the design enables cross-cohort comparisons. The sample includes oversamples of African Americans and some Hispanic ethnicities. The HRS includes information about the respondents' children whether or not they live with the respondent and about the existence of grandchildren. We do not distinguish between biological and step grandchildren. We use data from 2008 and combine public use files from the HRS Website (National Institute on Aging, 2007) with the Rand L file and the Rand Family B file (Chien et al., 2012; St. Clair et al., 2011).

Survey of Consumers

The June 2012 Survey of Consumers (SC) is a telephone survey of a national probability sample of U.S. adults age 18 and older. It includes a module that enumerates respondents' parents and biological and step offspring who are at least 18 years old and obtains information about intergenerational transfers. The module was developed in collaboration with the Survey Research Practicum and the Survey of Consumers at the University of Michigan. The data are an independent survey, but also served as a full-scale pretest data collection that would inform the

design of the 2013 Panel Study of Income Dynamics (PSID) Roster and Transfer Module now in the field (Bianchi, Seltzer, Song, and Schoeni, 2013).

The SC data include reports about short-term transfers of time and money. These are transfers that occurred in 2011, the year before the interview, as well as financial assistance that parents (or a parent and his or her spouse) gave adult children since the child turned age 18 for educational expenses, help with housing expenses, and other large financial transfers. The question about time transfers asked about all time transfers whereas the question about financial transfers asked about financial support worth at least \$100. Long-term financial transfer questions asked about loans, gifts, or other support worth at least \$500. We use these data to show differences by parents' education in transfers from the perspective of adult offspring age 25 and older.

Cross-topic concerns

Race is a core concept for this report. Change over time and across census data sources in how this concept is measured presents challenges for many researchers. By using the PUMS data, variables for race are harmonized across years, although many problems remain. In 1970 and later years, an individual's race was reported by someone in the household or group quarters. In the 1990 and 2000 U.S. census, the respondents were specifically asked what race the person "considers himself/herself" to be. We use the variable *RACE* as harmonized by the PUMS files. The variable is comparable across 1970, 1980 and 1990. However, beginning in 2000, respondents were allowed to identify more than one race. For our analyses, those who identified more than one race are re-classified as "Other" for 2000, 2007-2009.

Hispanic ethnicity is defined in this study according to the *HISPAN* variable provided in the PUMS data. Before 1980, no question about Hispanic ethnicity was asked of respondents. Therefore, an imputation rule was developed by the Minnesota Population Center to extrapolate information based on Hispanic birthplace, parental birthplace, grandparental birthplace, Spanish surname, and/or family relationship to a person with one of these characteristics. See Gratton and Gutmann (2000) for more details.

Disability For this project, information on disability is derived from several variables in the PUMS data for 2008 and 2009. We do not include data from 2007 because of discrepancies in the wording of the disability questions. The respondent is asked to identify whether she or he has trouble with any of the following items: cognitive difficulties, ambulatory difficulty, independent living difficulty, self-care difficulty, vision difficulty and hearing difficulty. Our classification for individuals with any disability represents those respondents who reported difficulty with any one of those items. Items were also examined separately.

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