The Gerontology Institute
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Black Lifetimes Matter: How Systemic Racism Shapes the Lives of Older Black Adults

Graphic evidence of police brutality and discrimination have launched an extraordinary national conversation about systemic racism in the United States. To sustain that conversation, people and organizations who oppose racism have a duty to speak up, and those with relevant information have a responsibility to share it. Gerontologists—people who study aging and older people—have a unique perspective on the toll of systemic racism on Black people over the course of their lives. The evidence is devastating.

Gerontologists know that Black people, in general, begin life far behind White people in the accumulated wealth of their families, the quality of their housing and schools, and the richness of their informal networks for advancement. By the time Black people reach older age, the lifetime effects of systemic racism in education, lower wages, inferior and segregated housing that limits access to healthy food and health care, and the stress of race-based discrimination have taken a measurable toll.

Since its creation in 1984, the Gerontology Institute at UMass Boston’s McCormack Graduate School has served as the state’s primary resource for information about older people. Over the years, we have developed two unique instruments that measure the economic and health status of older people in Massachusetts and beyond. The Elder Index measures the true cost of living for people 65 and over, using a market basket of goods and services tailored specifically to older people. The Massachusetts Healthy Aging Data Report provides a comprehensive profile of older adult population health by municipality. Both contain information about racial disparities. The articles by my colleagues that follow examine that data and more.

The Elder Index reveals that all people 65 and over, those who are single and living alone are most likely to be economically insecure. In Massachusetts, most of them struggle to get by, but there is a stark divide based on race: economic insecurity is 31 percent higher for older Black singles living alone and even higher, at 33 percent, for older Black couples. This means that nearly two-thirds of older Black people in our state are struggling to make ends meet—to cover the rent or mortgage, food, medicine, and other essentials.

Many of the factors that make older people economically insecure also undermine their health. Researchers now recognize that these “social determinants of health”—such as income, housing, and access to healthy food—have a much greater impact on a person’s health than genetics or health care. The Massachusetts Healthy Aging Data Report, documents significant racial disparities in conditions strongly influenced by social determinants.

Traveling this same well-worn path of social determinants, the COVID pandemic is infecting, hospitalizing and killing older Black people at rates much higher than older White people. Our researchers are studying data coming from an unprecedented weekly survey conducted by the U.S. Census Bureau to understand the pandemic’s effects on U.S. households. Older adults in this survey are defined as 60 and older. (The number of respondents is not yet high enough to permit a Massachusetts-specific analysis, so the results described here are for the nation as a whole.) The data show older Black people faring worse than their white counterparts in measure after measure. A staggering 43% lacked confidence that they could put enough food on the table over the next four weeks, compared with 19 percent of older White households.

America is now confronting its legacy of racism due in large part to graphic images capturing the killings of George Floyd, Ahmaud Arbery and other victims of racial assault. While we do not have riveting video depicting the poorer health and inferior economic status of older Black people in Massachusetts, our research provides a panoramic view of their older age shaped by structural racism.

I urge you to read these brief articles by UMass Boston gerontologists about their work and how it illuminates the lifetime impact of racism. This is what we know; these are facts that matter. We must urgently confront them and act with the conviction we would truly feel if Black lives matter.

Len Fishman
Director, Gerontology Institute

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Social Determinants Drive Racial Health Disparities

By Elizabeth Dugan, Frank Porell, Nina Silverstein, and Chae Man Lee

One simple way to document the physical toll a lifetime of discrimination and disadvantage takes on the human body is to simply recite the facts. Placed in this frame, a significantly higher percentage of older Black adults in Massachusetts routinely struggles with many serious chronic diseases, disabilities and behavioral issues compared with older Whites.

The Healthy Aging Data Report team at UMass Boston has been working to provide tools and information to state and local leaders since 2012, collecting mountains of health information from cities and towns across Massachusetts. We’ve done similar work in Rhode Island and New Hampshire, and are organizing data from Connecticut now.

Such a rich trove of information also gives us an opportunity to look at the question of Black elder health from an entirely different perspective. What if you could collect health information about Black older adults and then filter out all kinds of variables that don’t have anything to do with race?

Well, we can. The results were striking when we began with the state’s significant racial health disparities among older adults and then statistically adjusted that information to account for a long list of socio-economic factors in their everyday lives. The bottom line: racial disparities in health — economic security, education, neighborhood and physical environment, employment and access to health care — that really matter.

How much do they matter? Among older Black residents of Massachusetts, those age 65 or older, 37.8% suffered from chronic kidney disease, compared with 27.3% of older White residents. Nearly half of Black older adults struggled with diabetes compared with 30.3% of White elders. Those diagnosed as clinically obese accounted for 27.2% of Black elders, compared with 18.9% of older White adults.

Hypertension is a serious but common problem for older adults among nearly all demographic categories. Slightly more than three of every four White elders in Massachusetts deal with hypertension but the rate among older Black adults climbs even higher to 84.3%.

The evidence of racial health disparities doesn’t simply appear as large gaps between Black and White elders when it comes to a few selected disorders. The breadth of health problems in which racial disparities exist – from anemia to heart failure to mobility impairments – also speak to the scale of the problem.

Not surprisingly, the greater incidence of medical problems among older Black adults is echoed in a higher rate of health care service utilization. Older Black Massachusetts residents visit hospital emergency departments nearly 23% more frequently than White older adults, a difference that likely speaks also to differing levels of access to primary care. In-patient hospital stays and the annual number of Medicare Part D prescriptions filled per person are also higher among Black older adults.

Taken together, all these individual indicators do more than simply describe the health status of Black people in later life and compare them to older Whites. Our work points to the social determinants that helped produce those health differences over many years and what needs to change to create meaningful improvement.
A Lifetime of Disadvantage Leads to Greater Economic Insecurity Among Older Black Adults

By Jan Mutcher, Yang Li, and Nidya Velasco Roldán

Economic insecurity is a particular threat for older Black Americans. Early in life, patterns of structural disadvantage lead to poorer access to higher education and an increased likelihood of low-wage or unstable jobs with fewer benefits. On average, Black families accumulate far less wealth than their White counterparts, adding to disparities in financial resources passed from one generation to the next. The accumulation of life-course experiences shaped by inequity result in Black Americans being at higher risk of entering later life with fewer financial resources, little or no pension income, and poorer health.

The Elder Index* informs us about the late-life consequences of inequities that occur throughout a lifetime. The index measures the costs faced by households that include one or two older adults age 65 or older living independently, establishing the income they need to pay for basic and necessary living expenses and age in their homes, without relying on benefit programs, loans or gifts. We calculate the Elder Index for every county in the United States, based on local estimates of necessary expenses for housing, food, transportation, health care, and basic household items. Although reflecting a bare-bones budget, the Elder Index is far higher than the federal poverty line, a commonly used threshold for measuring disadvantage (see Table 1 for Elder Index values for Massachusetts).

Comparing the Elder Index to people’s incomes reveals that everywhere in the U.S., many older people have incomes that fall short of what it takes to get by. As of 2019, about half of single people age 65 and older living alone had incomes below the Elder Index. Rates of economic insecurity are higher in states where incomes are lower, such as in the Deep South, and in areas where cost of living is especially high, such as in the New England states. Massachusetts ranks highest in the nation in the percentage of older singles living alone with incomes below the Elder Index, at 62%.

The index helps to illustrate how inequitable opportunities and experiences that unfold over a lifetime result in higher risk of economic insecurity among Black people, in Massachusetts and throughout the nation. As shown in Figure 1, economic insecurity rates in Massachusetts are higher than they are for the U.S. as a whole, but highest of all for older Black residents. Three out of four Black singles living alone in Massachusetts have incomes falling below the Elder Index, higher than among their White counterparts (58%) and higher than the rate for Black singles in the U.S. as a whole (64%). The risk of economic insecurity among singles is substantially higher than among couples (see Figure 2) but disparities by race persist among older two-person households.

| TABLE 1: THE ELDER ECONOMIC SECURITY STANDARD INDEX FOR MASSACHUSETTS, 2019 |
|-----------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
|                             | ELDER PERSON    | ELDER COUPLE    | ELDER PERSON    | ELDER COUPLE    | ELDER PERSON    | ELDER COUPLE    |
| EXPENSE                     |                 |                 |                 |                 |                 |                 |
| HOUSING                     | $800            | $1,369          | $1,899          | $800            | $1,369          | $1,899          |
| FOOD                        | $257            | $257            | $257            | $471            | $471            | $471            |
| TRANSPORTATION              | $288            | $288            | $288            | $445            | $445            | $445            |
| HEALTH CARE                 | $476            | $476            | $476            | $952            | $952            | $952            |
| MISCELLANEOUS              | $364            | $364            | $364            | $534            | $534            | $534            |
| ELDER INDEX PER MONTH       | $2,185          | $2,754          | $3,284          | $3,202          | $3,771          | $4,301          |
| ELDER INDEX PER YEAR        | $26,220         | $33,048         | $39,408         | $38,424         | $45,252         | $51,612         |
When resources fall short of what is needed to cover necessary expenses, older adults have to make difficult choices—between refilling a prescription and paying a utility bill, for example; or between paying the rent and purchasing sufficient food to get through the month. The disparities in rates of economic insecurity described in this report suggest that although many older adults struggle to make ends meet, the challenge is greater on average for older Blacks.

A New Racial Disparity Among Older Adults
By Jeffrey Burr, Cindy Bui, Changmin Peng, and Jan Mutchler

Older Black adults who experience a lifetime of discrimination and lack of opportunities face cumulative economic and health consequences as they age. The intersection of racial background and age plays out in dramatic terms for older Black adults, who are often embedded in families that are themselves financially distressed. They enter and live through their later years with relatively few resources to offset calamities like those associated with the pandemic.

During the COVID-19 crisis, the U.S. Census Bureau, along with collaborators from four other federal agencies, launched the Household Pulse Survey, a weekly national internet survey. It helps us understand the impact on individuals and families of government mandated shut-downs of businesses, voluntary and involuntary at-home quarantines, overloaded health infrastructures, non-stop media coverage, and widespread disruptions to daily life. Respondents were asked about stressors experienced at the household and individual levels, including loss of employment income, inability to pay rent or the mortgage, food insufficiency, and lack of access to medical care. Information on emotional distress, such as depression and anxiety, was also collected.

In this brief report, we draw on ongoing work by our research team, comparing the stressful conditions and emotional fall-out of COVID-19 over a three-week period in May 2020 on Black and White adults age 60 and older. Our findings show that older Black adults are being heavily impacted by the many consequences of the pandemic. As shown in Figure 1, older Black adults are significantly more likely than their White counterparts to have experienced loss of employment income since mid-March, with nearly four out of ten older Black adults reporting this experience.

Older Black adults are also more likely to experience food insecurity and to have missed making their rent or mortgage payment. Older adults expect even worse times to come, with 21% of Black adults having no or only slight confidence that they will be able to make their next rent or mortgage payment on time (compared to 9% of older White adults). A stunning 43% of older Black adults lack confidence they will be able to afford the kinds of food they need over the next four weeks (compared to 19% of older White adults; figures not shown). On one dimension in Figure 1, Black and White older adults show similar levels of impact, with 46% of Whites and 44% of Blacks having delayed medical care in the previous 4 weeks due to the pandemic, or not having received it at all. However, given that nearly
one-third of older Blacks report fair or poor health, compared to 21% of older Whites (figures not shown), the implications of not receiving care may be more critical for them.

The pandemic has created emotional distress for many older people, but older Black adults are being hit harder than their White counterparts. As shown in Figure 2, 24% of older Black adults report symptoms of anxiety, compared to 21% of older White adults. As well, more Black than White older adults report symptoms of depression (21% vs 17%). These high levels of distress are likely to continue as the COVID-19 crisis continues. Data adequate to explore detailed racial disparities in the consequences of COVID-19 for Massachusetts are not yet available. However, our initial work suggests that older people in Massachusetts are also reporting loss of employment income, missed payments on rent and mortgage, food insecurity, and worries that things will get worse for themselves and their families.

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