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Common Beliefs About the Rural Elderly: Myth or Fact?

U.S. Senate Special Committee on Aging

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COMMON BELIEFS ABOUT THE RURAL ELDERLY: MYTH OR FACT?

A Staff Report
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UNITED STATES SENATE

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COMMON BELIEFS ABOUT OLDER AMERICANS IN RURAL AREAS: MYTH OR FACT?

A. CONCEPTS OF RURAL

A commonly held belief is that it is easy to measure the elderly population living in small towns and rural areas outside large cities. In fact, there is some debate over the concept of "rural" or the appropriate way to measure rural populations.

The Census Bureau and the Office of Management and Budget (OMB) define "rural" differently. According to the Census Bureau, "rural" is defined as territory outside places of 2,500 or more inhabitants, or outside an urbanized area. An urbanized area comprises one or more places and the adjacent densely settled surrounding territory that together have a minimum of 50,000 persons. OMB defines "nonmetro" areas as those outside a metro area.

A metro area is a county or group of counties containing a place or urbanized area of 50,000 or more and a total population of 100,000 or more, including adjacent counties which have a high degree of economic and social integration with the central county.

The overlap of concepts of rural and nonmetro is less than one might expect. For example, while approximately two-thirds of the nonmetro population is rural, only 16 percent of the metro population is rural (see Chart 0.01). Examples of nonmetro areas near Washington, D.C., include Winchester, Virginia; Cumberland and Salisbury in Maryland; and Martinsburg, West Virginia.

The nonmetro/metro designation is mainly used in this briefing for pragmatic reasons. Most data presented are from existing, national surveys of a general-purpose nature which collect data at the county level, allowing a nonmetro/metro designation to be made. Thus, it should be remembered that the use of this designation does not imply that it is the "best."

One of the most prominent characteristics of rural America is its social and economic diversity. Due to the availability of data, however, the information presented here examines differences in a summary fashion by using the nonmetro/metro dichotomy. It is important to remember the diversity of rural America that exists behind these summary figures.

For additional information regarding the metro/nonmetro distinction, refer to Charts 0.1-0.5.

B. POPULATION

It is commonly believed that elderly individuals and children comprise higher proportions of the nonmetro population than metro population, and that the proportion of elderly persons is higher in the nonmetro South than in other regions.
Data reveal that elderly persons and children are proportionally more concentrated in nonmetro areas (See Chart 1.1). According to the 1990 Census, the elderly represented about 15 percent of the nonmetro population, but only 12 percent of the metro population. The proportion of elderly persons in the South, however, is not greater than in other regions (See Chart 1.2).

The 1990 Census indicates that 8.2 million elderly persons live in nonmetro areas (or 26 percent) compared with 23 million elderly residing in metro areas (See Chart 1.0). Slightly greater proportions of nonmetro elders are 75 years of age and older than elderly individuals residing in metro areas. Approximately 73 percent of males between 65 and 69 years of age are veterans, as are 46 percent of males between 70 and 74, and 21 percent of males age 75 and older (See Charts 1.3 and 1.4).

C. MINORITY POPULATION

It is commonly believed that a lower proportion of minority elderly resides in nonmetro areas than in metro areas and that minorities in nonmetro areas are more impoverished than their metro counterparts. The data support these beliefs. In 1990 approximately one-fourth of the elderly population lived in nonmetro areas. The distribution of various race and ethnic groups, however, varied widely. For example, Asian and Pacific Islanders and Hispanics of any race were particularly concentrated in metro areas, whereas over half of American Indians, Eskimos, and Aleuts lived in nonmetro areas (See Chart 2.1).

Approximately 650,000 elderly persons of races other than white lived in nonmetro areas in 1990, compared with about 2.7 million residing in metro areas. Among the races other than white in nonmetro areas, over a half million were African Americans, Caribbeans of African decent and black Africans 1 (about 525,000 persons); 61,000 were American Indians, Eskimos, or Aleuts; 35,000 were Asian and Pacific Islanders; and 38,000 were persons of other races. In addition, approximately 132,000 elderly Hispanics (of any race) resided in nonmetro areas (See Chart 2.1).

Like the elderly population of all races, African American, Caribbean blacks of African decent and black African 1 elderly in nonmetro areas are more likely to be poor than those in metro areas. In 1990, nearly half of elderly African American, Caribbean blacks of African decent and black African 1 men (45 percent) and women (48 percent) had incomes below the poverty level (See Chart 2.3).

D. INCOME, POVERTY, AND EDUCATION

It is commonly believed that nonmetro elderly persons are more impoverished than their metro counterparts. In 1987, half of the nonmetro elderly population were in families that were poor or had incomes within 200 percent of the poverty line, as compared with 37 percent of their metro counterparts (See Chart 3.1). Only 18 percent of nonmetro elderly persons had high family incomes (greater than 400 percent of the poverty line), compared with 27 percent of the metro elderly population.

1 The reported Census data includes statistics on these populations.

Among elderly veterans in 1986, 70 percent of those residing in rural areas had family incomes of less than $20,000 in contrast to 59 percent of urban residents (See Chart 3.2).

In addition, monthly Social Security benefits in 1990 averaged $60 lower (or $539) for beneficiaries age 65 or older in nonmetro areas than for their metro counterparts ($699). Benefits for men in nonmetro areas averaged $637 while benefits for their metro counterparts averaged $711. Benefits for women averaged $470 for nonmetro residents compared with $526 for metro residents (See Chart 3.3).

With respect to educational attainment of persons age 65 or older, the data reveal that the percentage who completed high school did not differ very much by metro versus nonmetro residence. More than one-third of the nonmetro elderly, however, completed less than 9 years of school compared with approximately one-fourth of their metro counterparts. About 12 percent of nonmetro elderly completed 4 or more years of college compared with 7 percent of nonmetro residents (See Chart 3.7).

E. HOUSING

It is commonly believed that housing for nonmetro elderly persons is lower in value and in worse condition than that for the metro elderly. In fact, nonmetro elderly individuals are more likely to own their homes than elderly persons living in metro areas, as well as to own their homes free and clear, without a mortgage. When they do own homes, nonmetro elderly persons own homes of lower value which tend to be in poorer physical condition than homes of their metro counterparts (See Charts 1.1-1.4).

F. SOCIAL NETWORKS

Many believe that nonmetro elderly persons benefit from a closely knit community, have a better social support network, and are more involved in church than their metro counterparts. While there is little evidence that the nonmetro elderly have a more closely knit community than their metro counterparts, their social support network may be a little larger. Approximately two-thirds of elderly persons, both nonmetro and metro residents, live in family settings while one-third live alone (See Chart 5.1). One-half of both groups participate in outside activities weekly, although nonmetro elderly persons are more likely to attend weekly religious services (See Chart 5.2).

While three-fourths of both metro and nonmetro elderly individuals have a social network of friends and family to talk with or call on for help, nonmetro elders have a larger network of friends (See Charts 5.3, 5.4, 5.5).

Comparable percentages of rural and urban elderly veterans receive assistance in basic activities of daily living from family and friends; however more urban elderly veterans receive this assistance from professional caregivers (See Chart 5.6).
G. ACCESS

It is commonly believed that elderly individuals living in nonmetro areas have limited access to doctors, hospitals, or advanced medical services. The nonmetro elderly do in fact run up against a variety of barriers to accessing needed health care services. For example, there is a paucity of specialized services in nonmetro areas. To exacerbate the problem, it may be difficult for nonmetro elders to find transportation to facilities that provide these services. For specialized medical care and technology-intensive inpatient procedures, nonmetro elders must first travel to metro areas or nonmetro referral centers (See Chart 6.9).

In nonmetro areas which have a shortage of physicians and other primary care providers (See Charts 6.1, 6.2, 6.3, 6.4), elderly individuals may have to travel considerable distances for their primary care (See Chart 6.6). Once nonmetro elders are able to overcome the transportation barriers, they often encounter longer waiting times at their accustomed sites of care.

A five-state study of nonmetro versus metro hospital access for Medicare beneficiaries found that while nonmetro elders have a 14 percent higher rate of hospital admissions (See Chart 6.9), they are not hindered from receiving inpatient hospital care. Medicare enrollees in nonmetro areas had a lower rate of days of care (See Chart 6.5). Similar percentages of rural and urban elderly veterans used inpatient as well as outpatient health services in 1987 (See Charts 6.7, 6.8).

H. HEALTH

Although it is often believed that nonmetro elders are healthier and have a more active lifestyle, but tend not to take preventive health care measures, the data reveal that they are not healthier and not more active than their metro counterparts. In fact, a larger percentage of elderly persons in nonmetro areas assess their health as fair or poor (See Charts 7.1, 7.2).

There is no metro/nonmetro distinction made with respect to percentages of elderly who limit their activities due to illness (See Charts 7.3, 7.4), have high blood pressure or are overweight (See Chart 7.6). In addition, there are few differences in health behaviors of nonmetro elderly persons. For example, there is no disparity between percentages of nonmetro and metro elderly persons who smoke heavily (See Chart 7.9), drink heavily (See Chart 7.16), or eat healthful diets (See Chart 7.16).

In contrast, elderly women in nonmetro areas have higher blood pressure and are more vulnerable to dying from breast cancer because a significantly lower percentage had a clinical screening or mammogram than their metro counterparts (See Charts 7.5, 7.13, 7.14, 7.15).

The data also reveal that differences by area were not significant for the percent of minority elderly with fair or poor health or with limited activity days. True differences, however, may be masked by the small size of survey samples of minorities in nonmetro areas (See Charts 7.2 and 7.4).
APPENDIX I: FORUM WORK GROUP ON OLDER AMERICANS IN RURAL AREAS

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APPENDIX II: DEFINITIONS

RURAL VS. NONMETRO

Alternative Concepts and Definitions: There is some debate over the appropriate measurement of the population living in small towns and the countryside outside large cities. Both rural and nonmetropolitan (nonmetro) are defined by default—rural being anything "not urban" and nonmetro being anything "not metropolitan (metro)."

Rural: According to the Census Bureau, "rural" is defined as territory outside places of 2,500 or more inhabitants, or outside an urbanized area. An urbanized area comprises one or more places and the adjacent densely settled surrounding territory that together have a minimum of 50,000 persons.

Nonmetro: The Office of Management and Budget’s definition of non-metro refers to counties outside a metro area. A metro area is a county (or counties) containing a place or urbanized area of 50,000 or more, and a total population of 100,000 or more, including adjacent counties which have a high degree of economic and social integration with the central county. (In New England, the town—as opposed to the county—is the basic building block.)

The essential difference between the two concepts is that rural refers to low residential density and size, and nonmetro refers to counties lying outside metro areas. This definition of rural does not imply farm residence or a sparsely settled area, since a small city is defined as rural as long as it is outside an urbanized area and has fewer than 2,500 inhabitants.

Population Distribution: The 1990 Census identified 8.2 million elderly persons (or 26 percent) living in nonmetro areas and 23 million elderly in metro areas. In 1989, 54.6 million (22 percent) of the U.S. population of all ages was nonmetro and 66.2 million (27 percent) was rural. Although the percentages do not differ greatly, the overlap of rural and nonmetro population is less than might be expected. Just over half (54 percent) of the rural population live in nonmetro areas, while the rest live within metro boundaries. About two-thirds (65.5 percent) of the nonmetro population is rural. In contrast, only 16 percent of the metro population is rural. Persons living in the rural fringes within metro areas have a different level of access to the metro economy and services than those living in rural territory outside metro areas.

Social and Economic Diversity: Probably the most prominent single characteristic of rural America is its social and economic diversity. The Economic Research Service of the Department of Agriculture has identified seven distinct types of rural counties according to their major economic base, presence of federally owned land, or population characteristics:

1. counties depending heavily on farming;
(2) counties depending heavily on manufacturing;
(3) mining counties with economies based principally on natural resources;
(4) counties specializing in government functions;
(5) persistent low-income or poverty counties;
(6) Federal land counties; and
(7) retirement counties.

The South contains the largest share of both nonmetro counties (1,061 counties or 44 percent of the total) and population (23.5 million or 44 percent). However, the greatest share of nonmetro territory is in the Midwest and Western regions.

Use of Nonmetro/Metro Designation: The nonmetro/metro designation is mainly used in this briefing for pragmatic reasons. Most data presented are from existing national surveys of a general-purpose nature, and not from special studies of the rural population. These existing surveys now collect data at the county level, along with a nonmetro/metro designation to be made. Hence, use of this designation does not imply it is the "best". However, a substantial proportion of rural persons live in metro areas. This limits the utility of the rural designation for studying the hinterland population. Other reasons for use of the nonmetro designation in this briefing are: (1) nonmetro boundaries are drawn beyond the primary commuting field of a metro area, (2) many agencies use alternate definitions of rural, increasing chances of confusion with Census Bureau-defined rural statistics; and (3) most data available in the years between the decennial census are collected and disseminated at the county level—designated as either metro or nonmetro. This facilitates the annual monitoring of conditions in nonmetro counties.

Elderly: Persons aged 65+ years and older.

APPENDIX III: DESCRIPTIONS OF DATA SOURCES

American Housing Survey: The American Housing Survey (AHS) is a biennial national survey of the Nation's housing. There are also individual surveys of 48 large metropolitan areas over a 4-year period. The surveys are longitudinal, and provide information on size, composition, and financial characteristics of the housing inventory, characteristics of its occupants, changes in the inventory resulting from new construction and from losses, indicators of housing and neighborhood quality, and characteristics and dynamics of urban housing markets. The national survey, conducted in odd-numbered years starting in 1968, but annual prior to that going back to 1973, also provides data for the four Census regions. The surveys are conducted by the Bureau of the Census acting as a collecting agent for the Department of Housing and Urban Development.

The current basic sample of housing units, first interviewed in 1985, was drawn from the 1960 Census with a sampling rate of 1 in 2,148. It was augmented to correct for undercoverage by several additional methods, including a sample of building permits for new construction completed since the 1980 Census, a sample of living quarters that were not housing units to identify units that were converted to housing units since the Census, and a sample of non-permit issuing land areas (primarily rural) to discover and incorporate other new construction and other additions to the housing stock. Similar methods are used to update the sample for each subsequent survey.

The sample is located in 170 self-representing sampling areas and 224 other sampling areas representing all remaining areas of the 50 States and the District of Columbia. The areas are located in all States and the District of Columbia. The basic sample of about 50,000 housing units is expanded in alternate years by units in "neighbor clusters" around selected sampled units or by added units in rural areas.


Census of Population: The census of population has been taken in the United States every 10 years since 1790. In the 1990 Census, data were collected on sex, race, age, marital status, and certain housing characteristics from 100 percent of the enumerated population. More detailed information such as income, education, occupation, industry, and an extended set of housing characteristics were collected from a one-in-six sample. The sample was applied by size of place of residence. The more detailed information was collected...
from 50 percent of households in places of less than 2,500 population, 1 out of 6 households in places of 2,500 or more population, and 1 out of 8 households in census tracts and block numbering areas having more than 2,000 housing units. For more information on the 1990 Census, see: U.S. Bureau of the Census, "1990 Census of Population and Housing Tabulation and Publication Program" (Washington, D.C.: U.S. Government Printing Office, 1989).

Current Population Survey: The Current Population Survey (CPS) is a household sample survey of the civilian noninstitutionalized population conducted monthly by the U.S. Bureau of the Census to provide estimates of employment, unemployment, and other characteristics of the general labor force, the population as a whole, and various other subgroups of the population. A list of housing units from the 1980 Census, supplemented by newly constructed units and households known to be missed in the 1980 Census, provides the sampling frame in most areas for the present CPS. In some rural locations, current household listings of selected land areas serve as the frame. The present CPS sample is located in 729 sample areas, with coverage in every State and the District of Columbia. In an average month during 1989, the number of housing units or living quarters eligible for the national sample was about 70,000, of which about 57,000 were interviewed households, and 2,000 were households at which the members were not available for interview. About 11,000 households were visited but were not eligible for interview.


National Health Interview Survey: The National Health Interview Survey (NHIS) is a continuing nationwide sample survey in which data are collected through personal household interviews. Information is obtained on personal and demographic characteristics, illnesses, injuries, impairments, chronic conditions, utilization of health resources, and other health topics. The household questionnaire is reviewed each year, with special health topics being added or deleted. For more health topics, data are collected over an entire calendar year.

The sample plan of the NHIS follows a multistage probability design that produces data about the noninstitutionalized population residing in the United States. The survey is designed in such a way that the sample scheduled for each week is representative of the target population and the weekly samples are additive over time. The response rate for the survey has been between 95 and 98 percent over the years.

The sample was designed so that a typical NHIS sample for the data collection years 1985-94 will consist of approximately 7,500 segments containing about 59,000 assigned housing units. Of these

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households, an expected 10,000 will be vacant, demolished, or occupied by persons not in the target population of the survey. The expected sample of 49,000 occupied households will yield a probability sample of about 127,000 persons. In 1988, there was a sample of about 125,000 persons and in 1989, a sample of about 117,000 persons.

National Medical Expenditure Survey: The 1987 National Medical Expenditure Survey (NMES II) provides measures of health status and estimates of insurance coverage and the use of services, expenditures, and sources of payment for the period from January 1 to December 31, 1987, for the civilian, noninstitutionalized population of the United States in the Household Survey and for the population resident in or admitted to nursing homes and facilities for the mentally retarded in the Institutional Population Component. The NMES is a research project of the Center for General Health Services Intramural Research in the Agency for Health Care Policy and Research.

The NMES II Household Survey sample is a national stratified multistage area probability sample of about 35,000 individuals in approximately 14,000 households. The design provided oversampling of population groups of special policy interest: African Americans, Hispanics, the poor and the near poor, the elderly, and persons with functional limitations. Each family in this survey was interviewed four times over a period of 16 months with baseline data on household composition, employment and insurance being updated at each interview, and information being obtained on illnesses, use of health service, and health expenditures for each family member.

Social Security and Supplemental Security Income Data: Social Security data are derived on a 100-percent basis from the Social Security Administration's Master Beneficiary Record (MBR) as of December 1990. The MBR contains information needed to administer the Social Security benefit program and limited demographic data on beneficiaries. Metro/nonmetro data are based on county codes in MBR. Since Metro Statistical Areas in New England are defined by cities and towns which are not coded in the MBR, Social Security data are compiled for New England County Metro Areas (NECMAS). Data on Supplemental Security Income (SSI) beneficiaries are derived in a similar way from the Supplemental Security Record (SSR).

Survey of Veterans: The 1987 Survey of Veterans was conducted for the Department of Veterans Affairs by the U.S. Bureau of the Census. It contained an area-probability sample covering the entire United States, weighted to agree with Census Bureau estimates of the U.S. population by age, sex, and race. The sample was based on veterans who were in outgoing rotation panels of Current Population Surveys (CPS) conducted by the Census Bureau. The sample is representative of veterans living in privately-owned households in the United States at the time they were rotated out of the CPS sample. Not included are veterans in long-term hospitals or other institu-
tional settings which include college dormitories, correctional facilities, nursing homes, and other nonhousehold living arrangements. Nor did the sample include persons not regularly attached to a household, such as homeless persons or others whose household affiliation is temporary or transitory. For this survey, proxy answers were not accepted; that is, if the veteran was not available for interview, other members of the veteran’s household were not asked to report information about the veteran. Interviews were completed on 9,442 veterans (97.8 percent of the total 11,439 cases assigned). These completed interviews included 2,122 veterans aged 65 years or over. The weighted sample total number of veterans was 26,143,086. The weighted sample number of veterans aged 65 and over was 5,889,671.

Concepts of Rural: Proportion of rural-urban population by nonmetropolitan-metropolitan status, 1989

* Civilian noninstitutional population: rural-urban as defined for the 1980 Census

SOURCE:
USDA, Economic Research Service
Current Population Survey (annual averages), Bureau of the Census
Conception of rural: Nonmetropolitan counties, 1990

Concepts of rural: Percentage of population classified as rural by nonmetropolitan counties, 1980

SOURCE: Health Resources and Services Administration, Area Resource File
Note: Copyright, 1997, Rural Health Research Program, Div. of Geographic Information Systems, National Center for Health Services Research, University of North Carolina at Chapel Hill. Reprinted with permission.

SOURCE: Health Resources and Services Administration, Area Resource File
Note: Copyright, 1987, Rural Health Research Program, Div. of Geographic Information Systems, National Center for Health Services Research, University of North Carolina at Chapel Hill. Reprinted with permission.
**Population: Age distribution of the elderly, 1990**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percent of Elderly</th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>65 to 74</td>
<td>56.5</td>
<td>23.0 million</td>
<td>58.5</td>
</tr>
<tr>
<td>75 to 84</td>
<td>33.2</td>
<td>9.7</td>
<td>31.8</td>
</tr>
<tr>
<td>85 and Over</td>
<td>10.3</td>
<td>2.9</td>
<td>7.6</td>
</tr>
</tbody>
</table>

**SOURCE:** Bureau of the Census, 1990 Census of Population

**Concepts of rural: Destination retirement by nonmetropolitan counties (USDA type), 1986**

SOURCE: Health Resource and Services Administration, Data Resource File
Note: Copyright 1990, Rural Health Research Program, Caryl G. Shepa Center for Health Services Research, University of North Carolina at Chapel Hill, reprinted with permission.
Population: Age composition for the elderly and children, 1980 and 1990

- **Proportion 65 and Older**
  - Nonmetro 1980: 29.3%
  - Metro 1980: 27.7%
  - Nonmetro 1990: 26.6%
  - Metro 1990: 25.7%

- **Proportion Under 18**
  - Nonmetro 1980: 30.7%
  - Metro 1980: 32.3%
  - Nonmetro 1990: 33.4%
  - Metro 1990: 34.3%

SOURCE: USDA Economic Research Service

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Population: Age composition for the elderly and children, by residence and region, 1990

- **Northeast**
  - Nonmetro: 28.9%
  - Metro: 26.0%

- **Midwest**
  - Nonmetro: 25.0%
  - Metro: 24.7%

- **South**
  - Nonmetro: 26.1%
  - Metro: 25.0%

- **West**
  - Nonmetro: 29.4%
  - Metro: 27.2%

- **Proportion 65 and Older**
  - Nonmetro: 28.9%
  - Metro: 26.0%

- **Proportion Under 18**
  - Nonmetro: 25.0%
  - Metro: 24.7%

SOURCE: USDA Economic Research Service
Population: Percent of elderly males who are veterans by age, 1987

SOURCE: Dept. of Veterans Affairs, Survey of Veterans, 1987

Population: Percent of elderly who are veterans by age, 1987

SOURCE: Dept. of Veterans Affairs, Survey of Veterans, 1987
Minorities: Percent of elderly persons by race and Hispanic origin, 1990

<table>
<thead>
<tr>
<th>Minority</th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>All persons</td>
<td>8,238</td>
<td>23,004</td>
</tr>
<tr>
<td>Black</td>
<td>525</td>
<td>1,984</td>
</tr>
<tr>
<td>American Indian, Eskimo, or Aleut</td>
<td>54</td>
<td>61</td>
</tr>
<tr>
<td>Asian and Pacific Islander</td>
<td>33</td>
<td>422</td>
</tr>
<tr>
<td>Hispanic (of any race)</td>
<td>132</td>
<td>1,029</td>
</tr>
</tbody>
</table>

Minorities: Age composition for elderly and children by race and ethnicity, 1990

<table>
<thead>
<tr>
<th>Race</th>
<th>Nonmetro</th>
<th>Metro</th>
<th>Nonmetro</th>
<th>Metro</th>
<th>Nonmetro</th>
<th>Metro</th>
</tr>
</thead>
<tbody>
<tr>
<td>White</td>
<td>15.2</td>
<td>13.1</td>
<td>10.6</td>
<td>7.7</td>
<td>15.2</td>
<td>13.1</td>
</tr>
<tr>
<td>Black</td>
<td>25.2</td>
<td>23.2</td>
<td>33.5</td>
<td>33.0</td>
<td>25.2</td>
<td>23.2</td>
</tr>
<tr>
<td>Hispanic</td>
<td>40.9</td>
<td>4.8</td>
<td>34.3</td>
<td>31.1</td>
<td>40.9</td>
<td>4.8</td>
</tr>
</tbody>
</table>

SOURCE: Bureau of the Census, 1990 Census of Population

SOURCE: USDA, Economic Research Service
Minorities: Percentage of elderly persons below the poverty level by race and sex, 1990

- All Males, 65+: 11.3%
- All Females, 65+: 13.9%
- Black Males, 65+: 45.1%
- Black Females, 65+: 47.5%

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Income: Income level for the elderly, 1987

- Nonmetropolitan
- Metropolitan

- Poor/near poor: 25.9%, 18.1%
- Low income: 23.5%, 19.2%
- Middle income: 33.0%, 35.7%
- High income: 17.6%, 27.1%


Income: Elderly veterans with low income*, 1986

Percentage

Rural 70.5
Urban 59.3

*Family income less than $20,000
Source: Dept. of Veterans Affairs, Survey of Veterans, 1987

Income: Average Social Security benefit for elderly beneficiaries by sex, December 1990

Average monthly benefit

Nonmetropolitan Metropolitan

Total 538.50 598.77
Men 637.29 710.59
Women 470.12 526.36

Source: Social Security Administration, Office of Research and Statistics. 100 percent data from administrative records, December, 1990
Income: Differences in average monthly Social Security benefits, metropolitan minus nonmetropolitan, December 1990

Income: Proportion of elderly Social Security beneficiaries by sex, December 1990

SOURCE: Social Security Administration, Office of Research and Statistics, 100 percent data from administrative records, December, 1990

Education: Educational attainment of elderly persons, 1989

SOURCE: Social Security Administration, Office of Research and Statistics
20 percent from administrative records, December, 1990

SOURCE: Bureau of the Census
Current Population Reports, Series P-20, No. 431.
Housing: Physical structure problems of elderly households, 1989

- Nonmetropolitan: 4.5% (Severe), 6.6% (Moderate), 88.9% (Adequate)
- Metropolitan: 2.9% (Severe), 3.6% (Moderate), 93.5% (Adequate)

SOURCE: Department of Housing and Urban Development, 1989 American Housing Survey

Housing: Homeownership rate for the elderly, 1989

- Nonmetropolitan: 74.0% (Owners), 26.0% (Renter)
- Metropolitan: 82.3% (Owners), 17.7% (Renter)

SOURCE: Department of Housing and Urban Development, 1989 American Housing Survey
Housing: Housing costs as a percent of income for all elderly households, 1989

Percent

Nonmetropolitan

Metropolitan

25

20

15

10

5

0

Housing: Median value and ratio of owned house value to current income for the elderly, 1989

Thousands of dollars

Ratio to income 3.2

Ratio to income 4.3

Housing value

Income

Nonmetropolitan

Metropolitan

SOURCE: Department of Housing and Urban Development, 1989 American Housing Survey
Housing: Percent of owned houses owned free and clear (non-mortgaged) for the elderly, 1989

Social networks: Living arrangements of elderly persons, 1990

SOURCE: Department of Housing and Urban Development, 1989 American Housing Survey


NOTE: For information about sampling error, see "Marital Status and Living Arrangements: March 1990," Current Population Reports, Series P-20, No. 450, Appendix B.
Social networks: Social activities and religious attendance of the elderly, 1987

Social networks: Friends/relatives the elderly talked with in past month, 1987

SOURCE: National Center for Health Statistics, 1987 National Health Interview Survey
Social networks: Relatives the elderly can call for help, 1987

Number of relatives

- Nonmetropolitan
- Metropolitan

<table>
<thead>
<tr>
<th>Number of Relatives</th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>10%</td>
<td>13%</td>
</tr>
<tr>
<td>1 to 3</td>
<td>46%</td>
<td>47%</td>
</tr>
<tr>
<td>More than 3</td>
<td>43%</td>
<td>40%</td>
</tr>
</tbody>
</table>

SOURCE: National Center for Health Statistics, 1987 National Health Interview Survey

Social networks: Friends the elderly can call for help, 1987

Number of friends

- Nonmetropolitan
- Metropolitan

<table>
<thead>
<tr>
<th>Number of Friends</th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>25%</td>
<td>29%</td>
</tr>
<tr>
<td>1 to 3</td>
<td>36%</td>
<td>38%</td>
</tr>
<tr>
<td>More than 3</td>
<td>39%</td>
<td>33%</td>
</tr>
</tbody>
</table>

SOURCE: National Center for Health Statistics, 1987 National Health Interview Survey
Social networks: Source of assistance for elderly veterans receiving ADL*/IADL** aid, 1987

Access: Frontier counties, 1990

SOURCE: Dept. of Veterans Affairs, Services of Veterans, 1987
** includes eating, dressing, toileting, bathing, and personal grooming
* includes meal preparation, getting around community, shopping, managing money, using telephone, light housework

SOURCE: Health Resources and Services Administration, Area Resource File
Note: Copyright 1997, Rural Health Research Program, Carolinas Area Resource Center for Health Services Research, University of North Carolina at Chapel Hill. Reprinted with permission.
Access: Primary care physicians per 100,000 residents by region, 1987-88

United States: 108.8
Northeast: 125.1
Midwest: 119.2
South: 97.3
West: 97.4


SOURCE: Health Resources and Services Administration

Access: Professionally active physicians per 100,000 residents by type of county and population size, 1987-88

United States: 196
Metro: 225
Nonmetro: 128
Nonmetro 50,000 and Over: 96
Nonmetro 25,000-49,999: 68
Nonmetro 10,000-24,999: 58
Nonmetro 5,000-9,999: 53
Nonmetro 2,500-4,999: 33
Under 2,500: 20


SOURCE: Health Resources and Services Administration
Access: Number of Dentists per 100,000 residents by type of county, 1987

<table>
<thead>
<tr>
<th>Type of County</th>
<th>Number of Dentists per 100,000 residents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Metro</td>
<td>57.7</td>
</tr>
<tr>
<td>Nonmetro</td>
<td>50.0</td>
</tr>
<tr>
<td>50,000 and Over</td>
<td>25.0</td>
</tr>
<tr>
<td>25,000-49,999</td>
<td>10.0</td>
</tr>
<tr>
<td>10,000-24,999</td>
<td>5.0</td>
</tr>
<tr>
<td>5,000-9,999</td>
<td>2.5</td>
</tr>
<tr>
<td>2,500-4,999</td>
<td>1.5</td>
</tr>
<tr>
<td>Under 2,500</td>
<td>1.0</td>
</tr>
</tbody>
</table>

NOTE: Includes both full-time and part-time dentists
SOURCE: Health Resources and Services Administration
Area Resource File

Access: Rate of Medicare hospital discharges and days of care per 1000 enrollees, 1989

<table>
<thead>
<tr>
<th>Category</th>
<th>Rate per 1000 enrollees</th>
<th>Days of care per 1000 enrollees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicare Hospital Discharges per 1000 Enrollees</td>
<td>381</td>
<td>3,122</td>
</tr>
<tr>
<td>Nonmetropolitan</td>
<td>334</td>
<td>2,918</td>
</tr>
<tr>
<td>Metropolitan</td>
<td>3,500</td>
<td>3,000</td>
</tr>
</tbody>
</table>

SOURCE: Health Care Financing Administration, Medicare Administrative Records
Access: Access to care for the elderly, 1987

<table>
<thead>
<tr>
<th>Usual site of care</th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doctor's office</td>
<td>56%</td>
<td>44%</td>
</tr>
<tr>
<td>Hospital/other</td>
<td>26%</td>
<td>74%</td>
</tr>
<tr>
<td>None</td>
<td>18%</td>
<td>82%</td>
</tr>
<tr>
<td>Travel time to site of care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;16 minutes</td>
<td>32%</td>
<td>68%</td>
</tr>
<tr>
<td>16-30 minutes</td>
<td>27%</td>
<td>73%</td>
</tr>
<tr>
<td>&gt;30 minutes</td>
<td>15%</td>
<td>85%</td>
</tr>
<tr>
<td>Waiting time at site of care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;16 minutes</td>
<td>53%</td>
<td>47%</td>
</tr>
<tr>
<td>16-30 minutes</td>
<td>43%</td>
<td>57%</td>
</tr>
<tr>
<td>&gt;30 minutes</td>
<td>11%</td>
<td>89%</td>
</tr>
</tbody>
</table>

Percent of elderly


Access: Source of inpatient health care used by elderly veterans, 1987

<table>
<thead>
<tr>
<th>Location</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rural</td>
<td>75.0</td>
</tr>
<tr>
<td>Urban</td>
<td>79.3</td>
</tr>
<tr>
<td>VA hospital</td>
<td>20.5</td>
</tr>
<tr>
<td>Non VA hospital</td>
<td>16.3</td>
</tr>
<tr>
<td>No inpatient use</td>
<td>3.4</td>
</tr>
</tbody>
</table>

Percent

SOURCE: Dept of Veterans Affairs, Survey of Veterans, 1987
Access: Source of outpatient health care used by elderly veterans, 1987

<table>
<thead>
<tr>
<th>Source of Outpatient Health Care</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>VA hospital/clinic</td>
<td>19.3</td>
</tr>
<tr>
<td>Non VA hospital/clinic</td>
<td>62.3</td>
</tr>
<tr>
<td>No outpatient use</td>
<td>17.7</td>
</tr>
</tbody>
</table>

Access: Percent difference in per capita hospital admission rates for Medicare beneficiaries in rural and urban areas, 1988 (5 state study)

<table>
<thead>
<tr>
<th>Access Category</th>
<th>Percent Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>All admissions</td>
<td>+15</td>
</tr>
<tr>
<td>Admissions for technology intensive procedures</td>
<td>-3</td>
</tr>
<tr>
<td>Admissions for coronary artery bypass surgery</td>
<td>+4</td>
</tr>
</tbody>
</table>

Health Status:
Death rates per 100,000 elderly women ages 65-74 for heart disease
by county, 1979-87

Health status: Respondent assessed health of the elderly, 1990

SOURCE: National Center for Health Statistics, National Vital Statistics System

SOURCE: National Center for Health Statistics, 1986 National Health Interview Survey
Minority health: Days of restricted activity for the elderly by race, 1985-87

Health status: Elderly told at least twice* had high blood pressure by sex, 1990

*By health professional

SOURCE: National Center for Health Statistics, 1985-87 National Health Interview Surveys

SOURCE: National Center for Health Statistics, 1990 National Health Interview Survey
Health status. Overweight elderly who are very overweight*, 1990

<table>
<thead>
<tr>
<th>Percent of elderly</th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>10</td>
<td>11</td>
</tr>
<tr>
<td>Female</td>
<td>22</td>
<td>21</td>
</tr>
</tbody>
</table>

*Overweight status is respondent-assessed.

SOURCE: National Center for Health Statistics, 1990 National Health Interview Survey

Health status: Elderly whose parents had a history of cancer, 1987

<table>
<thead>
<tr>
<th>Percent of elderly</th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father with cancer</td>
<td>15</td>
<td>13</td>
</tr>
<tr>
<td>Mother with cancer</td>
<td>15</td>
<td>15</td>
</tr>
</tbody>
</table>

SOURCE: National Center for Health Statistics, 1987 National Health Interview Survey
Health status: Dental care/visits and toothlessness of the elderly, 1989

Dental visits
Within last 12 months
- 3 or more
- 1 or 2
- No visits

Toothlessness
- No teeth
- 1 or more teeth

Nonmetro
Metro

SOURCE: National Institute of Dental Research, National Institute of Health; National Health Interview Survey. 1989 Dental Supplement, National Center for Health Statistics

Health behavior: Elderly smokers who smoke heavily* by sex, 1990

Percent of elderly

Male
- Nonmetropolitan
- Metropolitan

Female
- Nonmetropolitan
- Metropolitan

*Heavy smoking is defined as at least 25 cigarettes per day

SOURCE: National Center for Health Statistics, 1990 National Health Interview Survey
Health behavior: Elderly drinkers who are heavy current drinkers by sex, 1990

Health promotion: Elderly who had blood pressure check in past year by sex, 1990
Health promotion: Elderly women who had pap smear in past year, 1990

<table>
<thead>
<tr>
<th>Percent of elderly women</th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>35</td>
<td>29</td>
<td>31</td>
</tr>
</tbody>
</table>

Health promotion: Breast self exam for elderly women, 1990

- **Does exam monthly**
  - Nonmetropolitan: 79%
  - Metropolitan: 81%
  - Knows how to do:
    - Nonmetropolitan: 44%
    - Metropolitan: 46%

SOURCE: National Center for Health Statistics, 1990 National Health Interview Survey
Health promotion: Breast exam of elderly women by health professional in past year, 1990

Percentage of elderly women

Nonmetropolitan: 39%
Metropolitan: 43%

SOURCE: National Center for Health Statistics, 1990 National Health Interview Survey

Health promotion: Receipt of mammogram by elderly women, 1990

Percentage of elderly women

- Ever had mammogram: Nonmetropolitan 47%, Metropolitan 56%
- Had mammogram in past year: Nonmetropolitan 28%, Metropolitan 36%

SOURCE: National Center for Health Statistics, 1990 National Health Interview Survey
Nutrition: Fiber and fat in diet for the elderly, 1987

<table>
<thead>
<tr>
<th></th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>High fiber</td>
<td>21</td>
<td>24</td>
</tr>
<tr>
<td>Low fat</td>
<td>70</td>
<td>73</td>
</tr>
</tbody>
</table>

SOURCE: National Center for Health Statistics, 1987 National Health Interview Survey

Long term care: Difficulties of the elderly with ADL's and IADL's, 1986

<table>
<thead>
<tr>
<th></th>
<th>Nonmetropolitan</th>
<th>Metropolitan</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 or more*</td>
<td>25</td>
<td>22</td>
</tr>
<tr>
<td>Walking</td>
<td>20</td>
<td>18</td>
</tr>
<tr>
<td>Transfer from bed or chair</td>
<td>10</td>
<td>8</td>
</tr>
<tr>
<td>1 or more**</td>
<td>30</td>
<td>27</td>
</tr>
<tr>
<td>Heavy housework</td>
<td>27</td>
<td>23</td>
</tr>
<tr>
<td>Shopping</td>
<td>15</td>
<td>13</td>
</tr>
</tbody>
</table>

*Includes walking, transferring, bathing, dressing, toileting, and eating
**Includes heavy and light housework, shopping, preparing meals, managing money

SOURCE: National Center for Health Statistics, 1986 National Health Interview Survey
Long term care: Percent of elderly with home health visits by functional status of the user, 1987

- Nonmetropolitan
- Metropolitan

<table>
<thead>
<tr>
<th>Functional Status</th>
<th>Percent of Elderly</th>
</tr>
</thead>
<tbody>
<tr>
<td>No difficulties</td>
<td>5</td>
</tr>
<tr>
<td>IADL and/or ADL difficulty</td>
<td>4</td>
</tr>
<tr>
<td>27</td>
<td>35</td>
</tr>
</tbody>
</table>

Health insurance: Insurance coverage for the elderly, 1987

- Nonmetropolitan
- Metropolitan

<table>
<thead>
<tr>
<th>Coverage</th>
<th>Percent of Elderly</th>
</tr>
</thead>
<tbody>
<tr>
<td>Only Medicare</td>
<td>14.6</td>
</tr>
<tr>
<td>Medicare and Medicaid</td>
<td>12.9</td>
</tr>
<tr>
<td>Medicare and Private</td>
<td>11.2</td>
</tr>
<tr>
<td>Medicaid</td>
<td>7.3</td>
</tr>
</tbody>
</table>

Health expenditures: Total health care expenditures for the elderly by functional status of user, 1987

Mean annual health care expenditures
- Nonmetropolitan: $7,100
- Metropolitan: $12,169

Mean percent paid by source
- Nonmetropolitan
  - Other: 6%
  - Medicaid: 2%
  - Private: 14%
  - Medicare: 24%
  - Self/Family: 51%

- Metropolitan
  - Other: 7%
  - Medicaid: 8%
  - Private: 11%
  - Medicare: 36%
  - Self/Family: 38%

Benefit use: Percent of elderly veterans receiving selected benefits, 1987

<table>
<thead>
<tr>
<th>Source of benefits</th>
<th>Rural (%)</th>
<th>Urban (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid</td>
<td>4.1</td>
<td>1.6</td>
</tr>
<tr>
<td>VA health benefits for low income veterans</td>
<td>35.4</td>
<td>37</td>
</tr>
</tbody>
</table>

SOURCE: Dept. of Veterans Affairs. *Survey of Veterans,* 1987