

# California Men and Healthy Aging

Approximately 1.8 million men in California are 65 years old or over (retirement age). Another 3 million California men are between the ages of 50 and 64 (pre-retirement age). These men, born before or during the baby boom, represent 13 percent of California’s population and potentially face health issues associated with aging. This Short Subject presents some of the health issues they experience, compares their experiences to same-aged men nationally, reports preventative strategies some employ, and focuses on how health issues may differ for California men according to their race/ethnic categories.

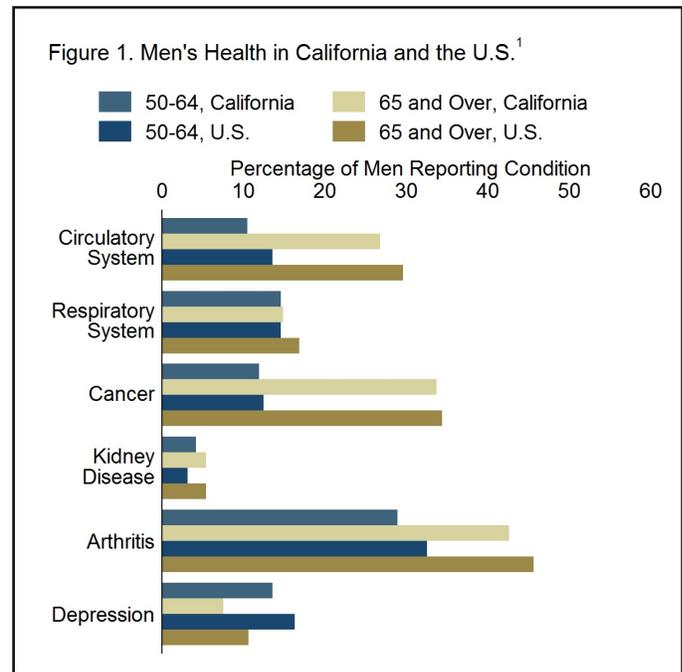
## CALIFORNIA MEN AND HEALTH

California men report many kinds of health issues. Here we present data from the Behavioral Risk Factor Surveillance System (BRFSS) about men’s self-reported issues with their circulatory systems (i.e. heart attack, angina or coronary disease, and stroke), respiratory systems (i.e., asthma, Chronic Obstructive Pulmonary Disease, emphysema, and chronic bronchitis), and all forms of cancer, kidney disease, arthritis, and depression (Figure 1).

A smaller percentage of California men ages 50-64 report health problems related to their circulatory system (10 percent), arthritis (29 percent), kidney disease (4 percent), and cancer (12 percent) than do those ages 65 and over (27, 43, 5, and 34 percent, respectively). However, this same age group (50-64) reports more incidence of depressive disorder (14 percent) than do men ages 65 and over (8 percent). Both age groups have similar rates of respiratory disorders (15 percent).

## NATIONAL COMPARISON

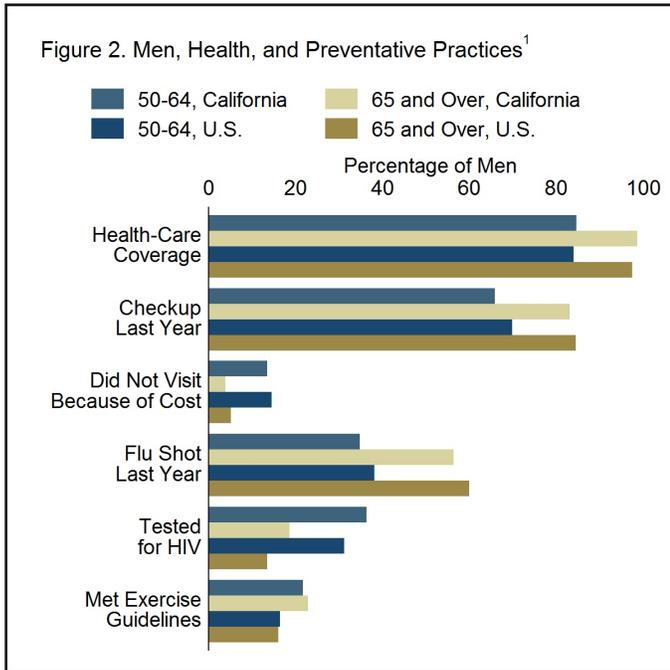
Comparing men in California to men nationally adds context (Figure 1). California men ages 50-64 and those 65 and over have lower rates of circulatory issues and depression than other U.S. men do. Problems



related to arthritis are also less prevalent in California. According to these data, rates of respiratory issues, kidney disease, and cancer are similar in California to those reported nationally.

## PREVENTATIVE MEASURES

Having health insurance, going to the doctor, and exercising are each important in maintaining and improving physical health. Though most pre-retirement-age (85 percent) and nearly all retirement-age (99 percent) California men have health insurance, 14 percent of pre-retirement-age and 4 percent of retirement-age men report that they could not see a doctor in the past year because of the cost (Figure 2). Thus, even for some who have health insurance, the financial burden of doctor visits is an issue. And, while California men are more likely to meet or exceed aerobic and muscle-strengthening guidelines than are men nationally, nearly 80 percent do not get enough exercise.



### CALIFORNIA MEN, HEALTH, AND RACE/ETHNIC CATEGORY

The BRFSS is an excellent source of health-related data, but its relatively small sample size (4,252 men in California over the age of 50) limits its use when comparing across race/ethnic groups. Because of this, we turn to a larger dataset from the Census Bureau’s American Community Survey, which asks respondents about cognitive (i.e., remembering, concentrating, and making decisions), ambulatory (i.e., walking, climbing, lifting, or carrying), independent living (i.e., performing basic tasks outside the home alone), self-

care (i.e., taking care of personal needs such as bathing or dressing), and hearing/vision difficulties.

While White men tend to report fewer health problems than men from other racial/ethnic backgrounds, differences in the rates of cognitive and self-care difficulties are small and generally insignificant in statistical terms (Figure 3).

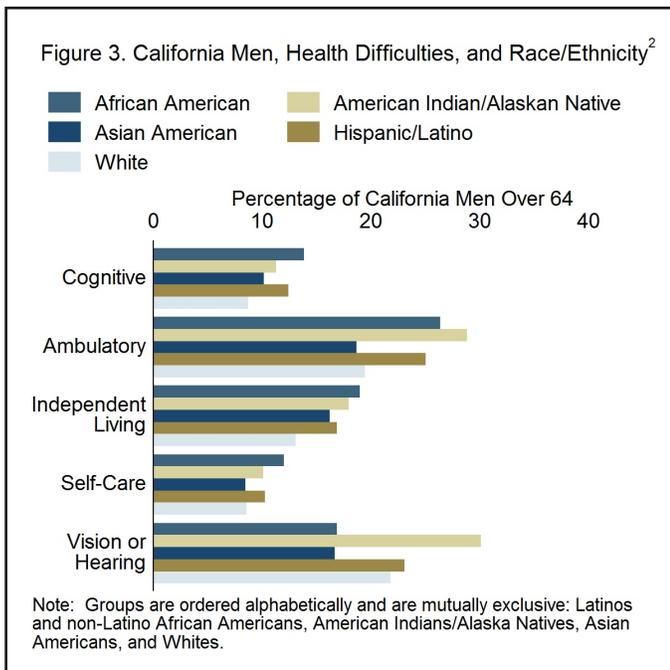
There is more variation according to race/ethnic category for the remaining three reported difficulties. While more than 25 percent of African-American and American Indian/Alaskan Native 65 and over report having ambulatory difficulties, 19 percent of their White counterparts do. African-American men 65 and over have the highest rate of independent living difficulty (19 percent), and their White counterparts represent those with the lowest rate (13 percent).

### FURTHER READING

*Health and Retirement Study: Online Bibliography*, (University of Michigan).  
<http://www.hrsonline.isr.umich.edu/biblio>

### REFERENCES

- Centers for Disease Control and Prevention (CDC), *Behavioral Risk Factor Surveillance System Survey Data*, (Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2011). <http://www.cdc.gov/brfss/>
- U.S. Census Bureau, *2008-2010 American Community Survey Public Use Microdata*, (Washington, DC: U.S. Census Bureau, 2011). <http://www.census.gov/acs/www/>



*This Short Subject was requested by Assembly Member Mariko Yamada, Chair of the Committee on Aging and Long-term Care.*

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