

February 2016

Hidden Health Problems Among California's "Hidden Poor"

Steven P. Wallace, D. Imelda Padilla-Frausto

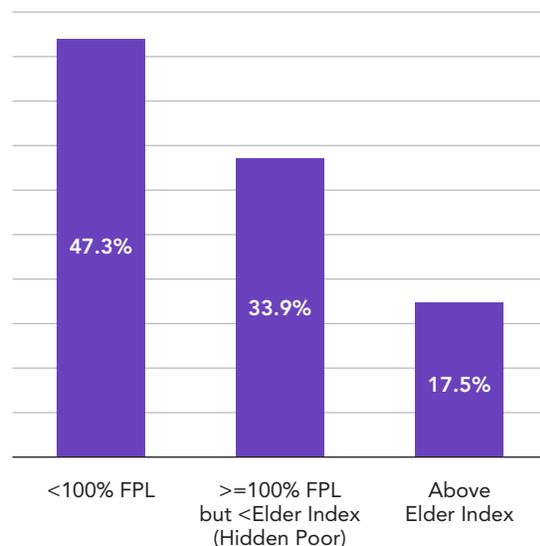
Many older Californians have incomes that are just above the federal poverty level (FPL) but below a decent minimum standard of living as determined by the Elder Economic Security Standard™ Index (Elder Index), a measure of poverty that takes into account the true cost of living in all 58 California counties. These older adults—the “hidden poor”—have substantially more health problems and less access to care than those with higher incomes, but they cannot afford to pay privately for assistance and often do not qualify for public programs that could help them manage their health problems. Planners and policymakers need to pay more attention to this hidden poor population.

More “hidden poor” than poor

Almost one-quarter (24.2 percent), or 655,000, California adults age 65 and older living alone or with only their spouse/partner had a 2013 income above the federal poverty level (FPL) but below the Elder Economic Security Standard™ Index (Elder Index), according to the U.S. Census American Community Survey. This is more than twice as many as those who had incomes below the FPL (11.6 percent). Latino, African-American, and Asian older adults who lived alone or with only their spouse/partner had the highest rates of being among the hidden poor (35.4, 30.6 and 29.2 percent, respectively); combining the officially poor (<FPL) and the hidden poor shows that about half of Latino, African-American, and Asian elders had incomes that fell below the Elder Index (i.e., they were part of both the officially poor and hidden poor populations). While the percentage of non-Latino whites with incomes below the Elder Index (29.6 percent) was lower than the percentage among elders of color (noted above), the percentage of hidden poor among older non-Latino white singles and older couples was almost three times their official poverty rate (21.5 percent versus 8.1 percent).¹

Exhibit 1

Fair & Poor Health by Elder Index, Ages 65+, California, 2013-14



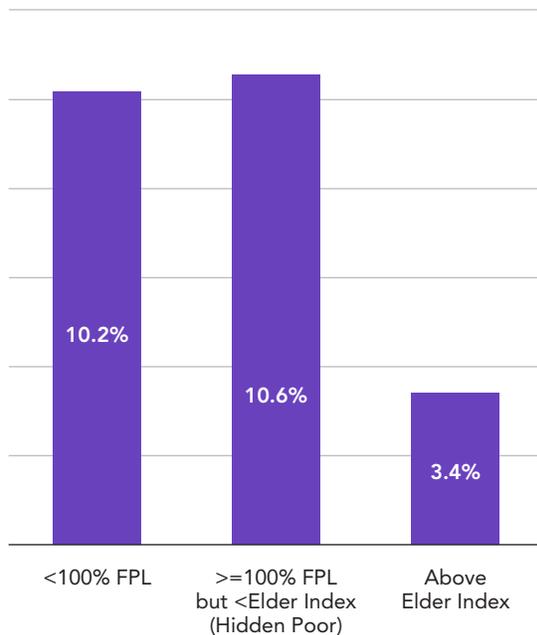
Source: 2013-14 California Health Interview Survey

Poor health status

Health status is substantially worse among the hidden poor than among those with higher incomes. The rate of poor and fair self-assessed health status among older

Exhibit 2

Depression* by Elder Index, Ages 65+, California, 2013-14



*Self-reports feeling depressed some, most, or all of the time in past month

Source: 2013-14 California Health Interview Survey

hidden poor Californians was nearly twice that of older adults above the Elder Index (Exhibit 1). This indicates a high level of health care needs among the hidden poor elder population.

Mental health problems are also higher among those living below the Elder Index. Older Californians who lived alone or with only a spouse/partner were three times as likely as those with incomes above the Elder Index to say that they had felt depressed “some, most, or all” of the time during the past month (Exhibit 2). There were no significant differences between those with incomes below the FPL and the hidden poor.

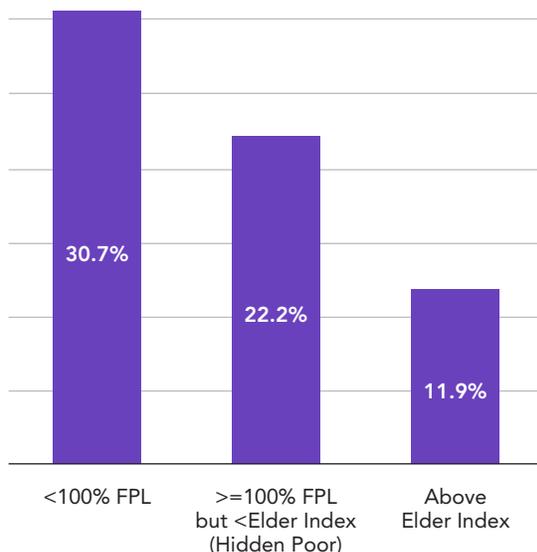
Twice as likely to face barriers to care

Older adults among the hidden poor not only suffer disproportionately from ill health compared to older adults with higher incomes, but they also face barriers to care. Most older adults who were living alone or with only a spouse/partner had sought a timely medical appointment (i.e., within two days) for an illness or injury (71 percent). However, within this group, the hidden poor were nearly twice as likely as those above the Elder Index (22.2 percent vs. 11.9 percent) to report that they never or only sometimes got timely appointments when needed (Exhibit 3). This means that older adults with higher health care needs are also more likely to face barriers to meeting their health care needs when they have incomes below the Elder Index.

These data show that the Elder Index identifies a population of individuals who have high needs for health care and other services but who are likely to be among the hidden poor. Because their incomes are above the FPL, these older Californians are less likely to be identified and prioritized in planning and programs for assistance. By being above the FPL and below the

Exhibit 3

Difficulty Obtaining Timely Medical Care by Elder Index, Ages 65+, California, 2013-14



Source: 2013-14 California Health Interview Survey

Elder Index, these older adults lack sufficient income to meet their basic needs without a subsidy as defined by government standards for housing, food, and medical care as well as for transportation and other basic necessities. As detailed in earlier policy briefs,² state and federal policies need to address the gap in income these older adults face as they struggle to make ends meet after a lifetime of contributing to society.

Data and Funding

This fact sheet was published with data from the California Health Interview Survey (CHIS), a collaborative project of the UCLA Center for Health Policy Research, the California Department of Public Health, and the California Department of Health Care Services. More information about CHIS 2013-2014 is available at www.chis.ucla.edu. Funding for the calculation of the 2013-14 Elder Index and its inclusion in CHIS was provided by a grant from The California Wellness Foundation. For details about how the Elder Index is calculated, see the 2011 methodological appendix. The California Elder Economic Security Standard Initiative is led by the Insight Center for Community Economic Development, Oakland, California.

Suggested Citation

Wallace SP, Padilla-Frausto DI. *Hidden Health Problems Among California's Hidden Poor*. Los Angeles, CA: UCLA Center for Health Policy Research, February 2016.

Endnotes

- 1 Padilla-Frausto DI, Wallace SP. *The Hidden Poor: Over Three-Quarters of a Million Older Californians Overlooked by Official Poverty Line*. Los Angeles, CA: UCLA Center for Health Policy Research, 2015. <http://healthpolicy.ucla.edu/publications/Documents/PDF/2015/HiddenPoor-brief-aug2015.pdf>
- 2 Padilla-Frausto DI, Wallace SP. *The Federal Poverty Level Does Not Meet Data Needs of the California Legislature*. Los Angeles, CA: UCLA Center for Health Policy Research, 2012. <http://healthpolicy.ucla.edu/publications/Documents/PDF/FPLBBFINAL4-30-12.pdf>; Padilla-Frausto DI, Wallace SP. *The High Cost of Caring: Grandparents Raising Grandchildren*. Los Angeles, CA: UCLA Center for Health Policy Research, 2013. <http://healthpolicy.ucla.edu/publications/Documents/PDF/grandparentsfb-jun2013.pdf>

Learn more about the Elder Index:
www.healthpolicy.ucla.edu/elderindex



This publication contains data from the California Health Interview Survey (CHIS), the nation's largest state health survey. Conducted by the UCLA Center for Health Policy Research, CHIS data give a detailed picture of the health and health care needs of California's large and diverse population. Learn more at:
www.chis.ucla.edu



Read this publication
online
FS2016-1