The prevalence of three different types of disabilities among Black and white Americans aged 65 and older plummeted in the decade between 2008 and 2017 according to a new nationally representative study.
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However, in both 2008 and 2017, Black older Americans had a substantially higher prevalence of cognitive problems, functional limitations (such as dressing or bathing) and limitations in activities of daily living (ADL) (such as serious difficulty walking or climbing stairs) compared to White older Americans.

Socioeconomic disadvantages such as lower educational attainment and lower income explained about half of the racial disparities observed for all three disability measures in both 2008 and 2017.

"This is unsurprising as previous research suggests that higher educational attainment protects against cognitive problems and physical disabilities in later life, and Black Americans experience unequal access to quality education," says first author Bolade Ajarat Shipeolu, a resident physician in psychiatry at the University of Toronto's Temerty Faculty of Medicine. "This finding supports continued efforts to improve education access and outcomes for Black Americans."

The study found a greater decline in the prevalence of serious later-life cognitive impairments among Black Americans compared to their White peers, resulting in a substantial narrowing of racial disparities related to this disability over the decade. During the study period, the prevalence of serious cognitive impairment declined from 17.1% to 13.2% among Black older Americans and from 11.3% to 9.2% among their White peers.

The reduced prevalence of cognitive impairments among older Black Americans may be linked to improved air quality in cities, hypothesize the researchers. Black Americans, who disproportionately live in urban areas, tend to face a greater burden of exposure to air pollution, a known
risk factors for cognitive impairment.

"Legislation to improve air quality may have benefited those in the inner city at a greater rate than those in suburban areas," says co-author Katherine Ahlin a recent Master of Social Work graduate from University of Toronto's FIFSW. "We hypothesize that this may have influenced the observed narrowing in racial disparities in cognitive impairment."

The prevalence of ADL limitations and functional limitations decreased within each racial group across the decade. In this case, the rates were quite comparable. Functional limitations declined by 5% among Black older adults vs. 4% among White older adults, while ADL limitations declined approximately 3% in both groups. As a result, racial disparities remained.

After age, sex, income, and education were taken into account, Black older Americans were still approximately 40% more likely than their White counterparts to experience both ADL and functional limitations in 2008 and in 2017.

"While it is exciting to see across-the-board progress in later-life disabilities over the decade, there is a need to accelerate improvements for older Black Americans to address persistent racial inequities in disabilities. It is essential that advances are made in modifiable social conditions such as universal access to quality education and health care, secure jobs with living wages, safe neighborhoods and clean air," says senior author Esme Fuller-Thomson, Director of the University of Toronto's Institute for Life Course & Aging.

The study used data from the American Community Survey which offers a nationally representative sample of older adults (≥65 years) including individuals living in the community and group quarters such as nursing
homes. The sample size was 423,000 older non-Hispanic Black (comprising 8% of the sample) and White Americans in 2008 and 537,000 respondents in 2017, 9% of whom were Black.


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