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ABSTRACT

The local effects of the aging of the American population have been overshadowed by concern about the national impact on programs like social security. But where particular segments of the older American population live matters. Older Americans differ: in health, wealth, ethnicity, race, and, age. Generally, the young elderly have better health, more resources, and more social support. The older elderly, those in their late 70s and 80s, often are sicker, poorer, and more isolated. As the baby boom generation ages, there will be even more diversity among older Americans, and this diversity has spatial implications. Cities and slow-growing regions are generally home to the "demographically disadvantaged," while the "demographically advantaged" tend to live in the suburbs and booming metropolitan areas. Cities and older areas will need to provide more community and public services for the elderly even as their tax bases dwindle. Suburbs, too, must prepare for the coming age wave, because their current – and future – elderly populations will eventually need an array of public services.

BEYOND SOCIAL SECURITY:
THE LOCAL ASPECTS OF AN AGING AMERICA

I. LOCAL IMPACTS OF A NATIONAL TREND

The phrase "demography is destiny" underscores the national impact of America's large and growing elderly population.[1] Medical breakthroughs and other lifestyle and social changes over the course of the twentieth century ensure a longer life expectancy among Americans surviving into the twenty-first century. This increased longevity is especially important because of its compounding effect on the large post-World War II baby boom cohorts – 76 million strong – as they begin entering elderhood around the year 2011 (see Figure 1). From birth to the present, these large cohorts have bullied their way through the nation's school systems, labor market, housing market, and stock market – transforming institutions, both public and private, in their wake. The social and economic impacts should be just as precedent-shattering as the baby boomers march, in large numbers, into their senior years. And it is the *national* impacts these cohorts are bound to have on federal entitlement programs like Social Security, Medicare, and Medicaid that have dominated policy discussions of their demographic destiny.[2]

Figure 1: The Older Population, 1990-2050

[1] Peter G. Peterson, "*Will America Grow Up Before It Grows Old?"* (Random House, 1996); Peter G. Peterson, "*Gray Dawn: How the Coming Age Wave Will Transform America—and the World*" (Times Books, 1999); and National Academy On An Aging Society, *Demography Is Not Destiny*, (1999).

[2] Peterson, *Gray Dawn*, Chapters 2 and 3; National Academy On An Aging Society, *Demography Is Not Destiny*, Chapter V.

Yet, the current policy emphasis on *future* baby-boom aging impacts for *national* programs administered by the federal government overlooks the demographic divisions within *today's* elderly population, which hold *local* implications for central cities and suburban communities. This paper is intended to call attention to these neglected demographic divisions that exist within today's elderly population and examine how they are impacting the nation's regions, metropolitan areas, cities, and suburbs. It also points out the likely demographic divisions that will exist among baby boomers as they age into elderhood, and the challenges these cleavages will pose for central cities and suburban communities.

The sharp demographic divisions that exist within today's elderly population are often overlooked because the most recently retired members of our senior population appear to be relatively well off. They entered the workforce in a prosperous post-war period, and many bought homes with dramatically increasingly equity in the 1960s and 1970s. The GI Bill helped to make today's older Americans the most highly educated elderly cohort in history, and large numbers of men retained "good" jobs with company benefits and pension plans throughout most of their working lives. As parents of the large baby-boom cohorts, today's elderly have available ample, informal social support networks and plenty of children and grandchildren.

Still, there are divisions within today's elderly population based on their family and living arrangements that are correlated with their access to income and resources. Especially among seniors in their late seventies and eighties, female-headed households in poverty are more prevalent. These elderly rely less on private pension plans or savings, and have higher disability levels. Race and ethnicity also divide the elderly population, with blacks and Hispanics faring less well than whites on indicators of income, wealth, and home ownership. Even today's newly retired population, which tends to be the most fortunate segment of the elderly, will eventually bear the consequences of continued aging: increased risk of disability, death of a spouse, and greater dependency on family, friends or institutions.

These demographic divisions within today's elderly population do not exist uniformly across space. Some regions of the country, specific metropolitan areas or retirement communities, are able to attract the "demographically advantaged" segments of the senior population: well-educated "young elderly," married couples in good health, with high disposable incomes, and low demands on public services. Yet, there are relatively few of these retirement haven areas. The senior populations in most communities arise simply because existing life-long residents "age in place,"[3] which means that the social divisions that exist across space for the entire resident population become perpetuated and even exacerbated among the elderly population. Fast-growing regions in the nation's sunbelt that attracted professional, well-educated workers during their pre-elderly years will inherit a more "demographically advantaged" aging-in-place senior population. Similarly, suburban communities that attracted upper and middle-income families in the middle stages of their life course will find themselves with elderly residents who will contribute more to the community's tax base than they take away.

In contrast, central cities, inner suburbs, and metropolitan areas in regions that have suffered economic and demographic declines in recent decades will continue to house disproportionate numbers of the nation's

[3] Rochelle L. Stanfield, "The Aging of America," *National Journal*, July 20, 1996, pp. 1578-1583.

"demographically disadvantaged" elderly – "older elderly" people, widows and widowers, female-headed households, those with incomes below or near the poverty level and relatively high levels of disability, and (in central selected cities) significant low-income minority populations – as they continue to age-in-place. Concentrations of older, economically vulnerable, and disability-prone populations pose special challenges for local institutions as well as city and county governments that are often the most financially strapped. Yet, the fact that these spatial divisions within the elderly population will become perpetuated as a result of "aging-in-place" is generally unrecognized in discussions of national aging policies.

Looking ahead to the coming "age wave" as baby boomers march into their senior years, we can already identify demographic trends that will prove challenging for the nation's regions, cities, and suburbs. The aging of a significant segment of well-off boomers will create a "yuppie elderly" contingent who will gravitate to high amenity regions and retirement communities that will actively vie for this lucrative migration market. These senior versions of today's gated communities will probably dot large sections of the nation's Southeast, West, and scenic portions of the Great Lakes and New England.

But for the mass of aging boomers, the "aging-in-place" phenomenon will prevail, and create even sharper social divisions across communities than is the case today. Boomers are much more divided with respect to marital and living situations, the presence or absence of children who can provide support in old age, and access to wealth and private pensions (given the increasing inequality which began to emerge in the mid-1970s) than today's elderly were during their working age years. Moreover, because the plurality of boomers have lived most of their lives in the suburbs, distinctions between "have" and "have-not" communities will not cut across the city-suburb dichotomy. Concentrations of "demographically disadvantaged" boomer elderly will arise within suburban communities that will not be prepared to deal with the social services, health care, and transportation needs of a fast-growing less well-off senior population. These places will become common within most of the nation's metropolitan regions.

The remainder of this paper argues that: (1) today's elderly population is already demographically divided in ways that have important implications for the nation's regions, cities and suburbs; and (2) that a focus on the local impacts of aging on America's communities is just as compelling as the impending national "crisis" aging baby boomers will create in federal programs.

II. TODAY'S ELDERLY – MORE PROSPEROUS BUT DIVIDED

The elderly (aged 65 and over) population continues to grow in absolute numbers and as a share of the total US population. For most of the twentieth century, America's elderly population has grown faster than its non-elderly population. Reductions in infectious diseases and child mortality in the first half of the century, coupled with more recent breakthroughs in health care for the elderly and a variety of social and lifestyle changes have led to continuing increases in life expectancy (from 47.3 years in 1900 to over 76 years today) and continued growth of the elderly population.[4] For any given period, the magnitude of elderly growth is also affected by past fertility and immigration, which determine the size of the cohorts poised to enter elderhood. From this perspective, elderly growth in the 1990s represents a slowdown from previous decades, because generations entering elderhood – born in the 1930s – are smaller due to lower birth rates and a sharp cutback in immigration to the United States during those years. This recent slowdown explains why the 33.4 percent increase in the elderly population between 1980-1997 is smaller than the 54.3 percent increase over the 1960-1980 period. The slowdown will, in fact, continue until the year 2011, when the babyboomers enter the picture. Nonetheless, the 34-plus million elderly population comprises almost 13 percent of the total U.S. population.

The nation's large and growing elderly population is far from homogeneous. One can distinguish between those elderly that might be considered "demographically advantaged" and those that are less well off with respect to their household situations and social-economic profiles. For reasons discussed in the introduction, the most recently retired elderly cohorts are well represented among the economically better off segments of today's senior population, yet even within this group there are important demographic divisions. The rest of this section provides a demographic portrait of today's elderly – pointing out divisions by age, education and labor force participation, poverty and income levels, as well as racial and ethnic differences.

Young, Middle, and "Oldest" Elderly

The current "young elderly" (aged 65-74), who comprise over half of the entire 65-and-over population, appear to be most advantaged demographically. They are distinct from the "middle elderly" (75-84 year old) age group and "oldest-old" (age 85 or older) age group. These latter two groups are far more vulnerable to the negative aspects of aging including faltering health, death of a spouse, and mobility limitations. Also, in contrast to the current 65-74 year old age group, these older cohorts spent their working lives, at least in part, during the World War II or Depression years, accumulated fewer benefits and earnings and were less able to benefit from many of the recent medical breakthroughs that will increase longevity of today's "young elderly."

One demographic reality that is especially relevant to the two older groups is the continuing gender disparity in life expectancy. Women comprise six out of ten 75-84 year olds, and seven out of ten "oldest-old" (see Table 1 and Figure 2). While the gender gap narrowed slightly during the 1980s as both men's and women's life expectancy increased incrementally, recent estimates still show a gap, with male life expectancy at 73.1 years

[4] *United States, 1998 with Socioeconomic Status and Health Chart Book* (Hyattsville, MD: National Center for Health Statistics, 1998). Table 29, p. 200.

for men compared to 79.1 years for women.[5] This disparity, coupled with the fact that women generally marry men a few years their senior, results in increasingly large numbers of older widows, often living alone, with today's oldest cohorts having high levels of dependency and financial need.

Table 1: Demographic Change for U.S. Elderly, 1960-1997

	Age 65+	65-74	75-84	85+
Total Population (1,000's)				
1960	16,560	10,997	4,634	929
1980	25,550	15,581	7,727	2,240
1997	34,074	18,498	11,705	3,871
Percent Change				
1960-1980	54.3%	41.7%	66.7%	141.1%
1980-1997	33.4%	18.7%	51.5%	72.8%
Share of U.S. Population				
1960	9.2	6.1	2.6	0.5
1980	11.3	6.9	3.4	1.0
1997	12.7	6.9	4.4	1.4
Percent Female				
1960	54.9%	54.5%	56.5%	61.4%
1980	59.7%	56.6%	62.9%	69.6%
1997	58.9%	55.3%	60.5%	71.3%

Source: Author's analysis of U.S. Census Bureau Decennial Censuses and Postcensal Estimate Data

Figure 2: Number of Elderly Men and Women in 1997

[5] National Center for Health Statistics, 1998, Table 29, p. 200.

This gender imbalance in life expectancy and the distinction between the "young elderly" and the older groups is evident in the types of households in each group (see Figure 3 and Table 2). Married couples make up fully half of all the young-elderly households, yet are a distinct minority among the 75-84 group (36 percent) and comprise less than one-fifth of all households among the oldest-old. Conversely, the second most important elderly household type – women living alone or with other non-relatives (female-headed non-families) – comprise increasing proportions of households in the older stages of life. They make up well over half of the oldest-old households.

Figure 3: Household Compositions of Elderly Populations, 1997

Table 2: Household and Marital Status Profiles for U.S. Elderly, 1960-1997

	Nonfamily Households Maintained by (a)		Marital Status - Men			Marital Status - Women		
	Men	Women	Married	Widower	Other	Married	Widow	Other
Age 65+ for year								
1960	10%	24%	69%	19%	12%	37%	52%	11%
1980	9%	36%	75%	15%	10%	36%	52%	12%
1997	12%	37%	73%	16%	11%	41%	46%	13%
Age in 1997								
65-74	11%	28%	78%	9%	13%	52%	33%	15%
75-84	12%	44%	70%	22%	9%	33%	57%	10%
85+	15%	56%	49%	42%	9%	12%	78%	10%

(a) Percent of all households with householder age 65 and older
Source: Author's analysis of U.S. Census Bureau Decennial Censuses and Current Population Survey Data

Of women aged 85 and over, only 12 percent are currently married, while 78 percent are widowed. Among men of the same age, fully half are married and only 42 percent survived a spouse. Trend data show a slight increase over time in the percentage of elderly who are currently married, and small declines in the percent of women who are widowed. But by and large sharp distinctions within the elderly years remain. The loss of social and financial support for many of today's "middle elderly" and "oldest old" women make them more dependent on their children or other institutions.

Education Upgrading and Labor Force Withdrawal

Today's young elderly are distinguished by their higher levels of education attainment and their disengagement from the labor force. The former is a consequence of educational upgrading and is in no small measure due to the GI Bill, which subsidized higher education for returning World War II veterans. The youngest cohorts of today's elderly population attained higher levels of education than any previous elderly cohort. This not only readied them for productive employment during their working ages, but made them more rational planners, both financially and in terms of health coverage, for their elderly years. Table 3 shows that more than one-third of the "young elderly" in 1997 achieved at least one or more years of college, and only 31 percent did not graduate from high school. This contrasts sharply with the two older populations, especially the "oldest old," barely half of whom are high school graduates. The sharp trend toward higher education among the elderly is especially evident when one examines progress since 1960, when more than four-fifths of the elderly population had not graduated from high school, and only about 10 percent had one or more years of college.

Table 3: Education and Labor Force Participation for U.S. Elderly, 1960-1997

	Education Attainment (a)			Percent in Labor Force	
	Less than High School	High School Grad+	Some College+	Men	Women
Age 65+ for year					
1960	81%	19%	10%	30.9%	10.3%
1980	61%	39%	18%	19.2%	8.2%
1997	35%	66%	31%	17.1%	8.8%
Age in 1997					
65-74	31%	70%	34%	23.2%	13.9%
75-84	37%	63%	29%	8.8%	3.3%
85+	48%	52%	26%	3.0%	1.5%

(a) Percent of population in category

Source: Author's analysis of U.S. Census Bureau Decennial Censuses and Current Population Survey Data

Perhaps the greatest change between today's "young elderly" and new retirees of earlier periods is the way they approach retirement. There is a long-term trend toward withdrawal from the labor force among males. Labor force participation rates among elderly males declined from nearly 50 percent in 1950 to the high teens around the mid-1980s. This coincides with the widespread availability of full Social Security benefits and private pension plans. An especially important incentive for early retirement, with Social Security benefits at age 62 was instituted in 1961.[6] Furthermore, Social Security benefits and many private pension plans contained financial disincentives for working beyond age 65, some of which have been relaxed in recent years. While outlawed after 1986, a large number of jobs once mandated retirement at age 65 or 70.

This long-term decline in elderly men's labor force participation appears to have bottomed out, even showing a distinct "young elderly" rise since the mid-1980s.[7] Some of this change may be attributed to a relaxing of retirement plan disincentives, but there is also evidence that retirement for today's "young elderly" is more of a process than a simple one-time detachment from full-time work to full-time retirement. This disengagement may involve so-called "bridge jobs" – part-time or occasional full-time work – or self-employment. Workers' motivations may range from the need for additional earnings, the need to stay active, or the intention to "keep their hand in" the kind of work that they spent most of their career performing.[8]

[6] Joseph F. Quinn "Retirement Trends and Patterns in the 1990s: The End of An Era?" *The Public Policy and Aging Report*, Vol. 8(3) Summer 1997, pp. 10-19.

[7] Quinn, "Retirement Trends and Patterns in the 1990s," p. 10.

[8] Judith Treas, "Older Americans in the 1990s and Beyond," *Population Bulletin*, Vol. 50(2) May 1995, pp. 21-23.

Among women, elderly labor force participation rates have been uniformly lower than those for men. The current patterns are the result of two countervailing tendencies: the large increase in labor force participation among working-aged women since the 1960s; and the general tendency toward reduced labor force participation among the elderly. Still, the variety of employment experiences for men and women as they undertake a more gradual retirement process appears to characterize only the "young elderly" age group; labor force participation among the two older elderly groups is relatively small.

Poverty and Income

Today's elderly are far better off than those of earlier periods because they have benefited more from Social Security and other government programs, private pensions, and a generally prosperous economy for much of the post-World War II period. The relative change in the elderly's economic situation is illustrated by a sharply downward trend in elderly poverty since 1966 (see Figure 4). Most of the decline occurred during the first ten years of this period – from 28.5 percent in 1966 to 15 percent in 1976. From 1984 to the mid-1990s, elderly poverty hovered in the 11-12 percent range, and for the past three years has been below 11 percent (10.7 percent in 1997).

Social Security provides a mainstay of elderly income, accounting in the aggregate for about 45 percent; 22 percent comes from assets; 17 percent comes from private pensions; a mere 10 percent comes from earnings; and SSI accounts for slightly more than 1 percent of elderly annual income.[9]

Figure 4: Poverty Rate for the Elderly Population, 1966-1997

[9] US House of Representatives, Committee on Ways and Means, *1994 Green Book* (Washington, DC: Government Printing Office, 1994), pp. 864-865.

Despite the improved economic status for America's elderly generally, disparities and inequalities exist. Earnings inequalities over the life course, especially since the mid-1970s, among the working population translate into assets inequalities among the elderly.[10] Moreover, the low levels of elderly poverty are somewhat misleading in the sense that an appreciable number of elderly have incomes just above the poverty line, and their modest assets often make them ineligible for means-tested Medicaid, SSI or food stamps programs, placing them at risk for further vulnerability.[11]

It is clear that many of these disparities in poverty, income and assets play out across different types of households. Married-couple elderly households, especially those in the 65-74 age group, fare the best in terms of their overall financial well-being. They have the lowest rates of poverty and the highest rates of home ownership, and high levels of annual income (see Table 4). The households that fare the worst are women living alone or with non-relatives (female-headed non-families), especially those in their older elderly years. Still, home ownership among the elderly is relatively pervasive across all household types, indicating that a house can serve as an important asset for households with low incomes or without other financial resources.

Table 4: Percent Poverty, Household Income, and Homeownership of U.S. Elderly Households, 1997 (a)

	Poverty Rate	Percent Income More than $25,000/year	Percent Homeowner
Household Type			
Married Couple	4.5%	45.4%	91.5%
Male-householder Family	9.1%	47.4%	77.8%
Female-householder Family	14.1%	30.4%	78.6%
Male-headed nonfamily	13.3%	20.8%	66.2%
Female-headed nonfamily	23.0%	12.2%	67.7%
Total	10.8%	33.9%	82.1%

(a) For households with householder age 65+.
Source: Author's analysis of Current Population Survey Data.

Racial and Ethnic Differences

[10] Marilyn Moon and Janemarie Mulvey, *Entitlements and the Elderly: Protecting Promises, Recognizing Realities* (Washington, DC: The Urban Institute Press, 1995), Chapter 2.

[11] Treas, "Older Americans in the 1990s and Beyond," pp. 23-27, and Moon and Mulvey, *Entitlements and the Elderly*, pp. 14-15.

Just as America at large is becoming more diverse in terms of its racial and ethnic makeup, so, too, is the elderly population, though at a slower pace. The disparity is because of higher rates of mortality among the African-American population, and the fact that Hispanic and Asian populations have younger age structures by virtue of their more recent immigration waves. While non-Hispanic whites make up 73 percent of the total US population, they comprise fully 85 percent of the elderly population. This varies geographically, with high immigration states like California home to elderly populations that are 66 percent white, compared to 16 states, mostly in the Great Plains and New England, in which over 95 percent of the elderly are white.

The racial and ethnic makeup of the elderly population is important because of the different elderly-related mores, resources and attitudes of different groups.[12] Understanding racial distinctions on different social and economic attributes is especially important because, as with the non-elderly, elderly members of minority groups tend to cluster in specific communities, making their impacts highly localized. Relevant statistics for the four broad categories of non-Hispanic whites, blacks, Hispanics and Asians are shown in Table 5.

[12] Ronald J. Angel and Jacqueline L. Angel, *Who Will Care for Us: Aging and Long-term Care in Multicultural America* (New York: New York University Press, 1996).

Table 5: Demographic Profile of Race-Ethnic Groups for U.S. Elderly, 1997(a)

	White*	Black*	Hispanic	Asian*
Size (1,000s)	27,032	2,553	1,516	354
Age (%)				
65-74	55.7%	59.7%	65.4%	55.3%
75-84	35.1%	30.8%	26.2%	39.7%
85+	9.2%	9.5%	8.4%	5.0%
Total	100.0%	100.0%	100.0%	100.0%
Household Type				
%Married Couples	57.9%	37.6%	55.0%	67.7%
%Female-householder Family	6.2%	21.8%	16.0%	9.6%
%Female-head Nonfamily	25.8%	25.4%	17.9%	10.9%
Education				
%Less than High School	30.3%	55.8%	69.6%	39.0%
%High School Grad	69.7%	44.2%	30.4%	61.0%
%Some College+	33.3%	19.5%	12.8%	35.9%
%Poverty Households	8.6%	25.2%	24.4%	9.8%
%Household Income GT $25,000	35.4%	20.9%	24.6%	48.2%
Percent Homeowners	84.5%	71.0%	61.6%	73.8%

(a) Statistics for size, age, education pertain to persons age 65+; all other statistics pertain to households with householder age 65+.
* Not of Hispanic Origin.
Source: Author's analysis of U.S. Current Population Survey.

The African-American elderly population, at least for the present, represents the numerically largest elderly population of the three racial and ethnic minorities. Compared with non-Hispanic whites, African-American elderly show lower levels of education, higher poverty, and lower incomes. The latter attributes can be linked, in part, to the household structure of elderly blacks; there is a disproportionately low percentage of married-couple households, and a higher percentage of female-headed family households (typically, a female-headed household with children or other relatives).

Among the three minorities, Hispanics fare worst with respect to educational attainment, with fully seven out of ten Hispanic seniors having less than a high school education. Hispanic home ownership is also lowest out of the minority groups, although still above 50 percent. Despite lower levels of education and home ownership, poverty levels for Hispanic elderly are disproportionately lower than those for blacks, and a higher percentage have

household incomes greater than $25,000. A key distinction between Hispanics and blacks is the strong married-couple household base among the former, with a comparatively smaller number of households headed by women living alone.

The Asian population's characteristics contrast markedly with the other two groups. They have a higher percentage of elderly with some college than any of the groups or whites, and a substantially larger percentage of households with incomes greater than $25,000. Despite these characteristics, their poverty rates are higher than whites', and the rate of home ownership somewhat lower. Of all the groups, they show the highest percentage of married-couple households and lowest percentage of older women living alone or with non-relatives. The household compositions of elderly Asians and Hispanics suggest that these groups will continue to have strong informal support systems in their elderly years, just as in earlier stages of their lives.

III. WHEN THE BOOMERS TURN INTO SENIORS

In about a decade, the baby boomers themselves, born between 1946 and 1964, will reach retirement age. They will possess many of the positive attributes of their parents: they are even more highly educated, are expected to live longer, and are also aware of the necessity to plan for retirement years. Still, their impact on the nation's economy as well as local communities can hardly be viewed as a "straight line projection" of the trends observed during the 1990s. By virtue of their large size, these cohorts will contribute to noticeable aging-in-place populations in almost all parts of the country.

The rate of growth of the elderly population early next century (shown in Figure 5, upper panel) will take off dramatically. While initially this will increase the size of the relatively well-off "young elderly" segment, and can invigorate local economies and communities, it will increase competition for available housing and services. By contrast, those who retired in the late 1980s and 1990s did not face sharp competition among themselves for good housing, benefits, access to medical services and the like, because this group represented the relatively small "Depression cohorts" that could easily assimilate into the national economy as well as to the local community. Moreover, as the boomers age, exceptionally large numbers of "middle-elderly" and eventually "oldest old" populations will begin to accumulate in the third and fourth decades of the century. In short, the sheer size of these elderly cohorts may make their successful assimilation into elderhood more difficult than for today's young elderly.

Figure 5A: Projected Elderly Growth Trends, 1970-2030
Annual Average Growth Rate for Decades

Figure 5B: Elderly and Youth Share of 18-64 Year Old Population

Just as important for their prospects during elderhood as their numbers is their population heterogeneity in comparison to the "youngest old" segments of today's elderly. Some sense of how these two generations divide can be seen from the statistics in Table 6, which compares the attributes of early boomers (who will retire in the years 2011 – 2019) with the generation that includes most of their parents (who are retiring during the 1990s) at the time each cohort was aged 35-44. These comparisons show that, as a group, the early boomers are even better educated than their parents, yet there are sharp differences in patterns of family formation and the independence of women. During these middle-aged years when four-fifths of boomer parents lived in married-couple households, 37 percent of early boomers lived in other family types. During this middle-age period, more than a quarter of boomers were either divorced, separated, or never married compared with less than 14 percent of their parents. And while well over half of women in the boomer parent generation had three or more kids, this was the case for less than a third of early baby boomer women, who had considerably higher levels of childlessness.

These divisions suggest the diversity of family types at middle age, usually the high income years. The boomers who formed dual-earner households had higher incomes than those in other household types. Moreover, the early boomers and especially the later boomers entered the work force during a period when corporate downsizing, inflation, and high unemployment ushered in a long-term trend toward income inequality that is especially accentuated within the baby boom cohorts. The fact that more well-off members of the boomer generation will be able to invest in private pension plans, 401(k)s, and the like to supplement the likely reductions in Social Security support should make these divisions even wider as boomers enter their retirement years. And while the economic independence of women among the boomer generations can certainly be celebrated, those women who have been dependent on their own incomes as household heads will probably have fewer resources available to them during retirement.

Table 6: Demographic Profiles of Generations at Mid-life:
Early Baby Boomers and Boomer Parents

Selected Attributes at Age 35-44	Early Baby Boomers Born: 1946-1955 Retire: 2011-2019	Boomer Parents Born: 1926-1935 Retire: 1991-2000
Education		
% Less than HS	14.4%	38.3%
% College Grad	27.0%	13.0%
% Persons in Poverty	8.5%	5.7%
Labor Force		
% Women in Labor Force	76.6%	50.0%
% with Prof & Mgr Jobs		
Men	29.3%	29.3%
Women	32.5%	18.5%
Household Type		
% Married Couple	63.5%	79.4%
% Female-head	13.6%	10.1%
% Non-family*	19.3%	7.8%
Marital Status		
% Divorced or Separated	16.7%	7.2%
% Never Married	11.2%	6.7%
Children Ever Born to Women		
% None	18.1%	12.3%
% 3+	30.4%	55.0%

* includes both male and female headed nonfamilies

Source: Author's Analysis of 1970 and 1990 U.S. Census

This larger but more segmented boomer retirement population suggests a less straightforward scenario than the one we have painted for today's elderly. Not only did boomers have fewer children to provide their own social and economic support during old age, but for the country as a whole, the projected rise in elderly dependency will have more pervasive impacts than just on the Social Security trust fund.[13]

[13] See Peter G. Peterson, *Will America Grow Up Before It Grows Old?* (Random House, 1996); and Eric R. Kingson, "Ways of Thinking about the Long-term Care of the Baby-boom Cohorts," *Journal of Aging & Social Policy*, Vol. 7(3/4), pp. 2-23.

Summary

The demographic portrait for today's elderly is far rosier than was the case two or three decades ago. Because many had good jobs, with benefits, post-high school educations, and profited from home ownership, the recently retired elderly can look forward to later years with a higher quality of life than those who preceded them. Many who retired in the last ten years have the expectation of an extended period of good health, life with a spouse, engagement in interesting work, hobbies, or activities either in a retirement community or in the nicer parts of suburbia. While not all of today's elderly are financially secure, in good health, and surrounded by strong social support networks, this characterization applies to a larger share of today's young elderly than in the past. Furthermore, as the parents of the baby boom cohort, these older Americans led a traditional family lifestyle during much of their younger adult lives and produced an extraordinary number of children whom they can count on for social and economic support.

The newest "young elderly" cohorts – especially the white married couples that make up the majority among them – can serve as role models for later baby boomer retirees to emulate. Communities that attract these elderly are adding well-educated, healthy, active, often part-time, workers to their resident base. Their incomes and assets make them well positioned to grow old gracefully, even after the death of a spouse. At the other extreme are middle-elderly or oldest-old women living alone or with non-relatives. If they have children, family or friends near by, they will have someone to count on for informal support. If, however, they are living in isolation from those kinship networks, they present a greater challenge to the local community.

IV. ELDERLY DIVISIONS: REGIONS, CITIES, AND SUBURBS

The geographic distribution and spatial shifts of the elderly population will become more important as the elderly become a larger share of the national population. Regions and communities that tend to retain or attract more demographically advantaged segments of the elderly population will see a rise in the consumption of local services, net gains to their community tax bases, and the involvement of an energetic, active population. On the other hand, areas that tend to keep the less advantaged segments of the elderly will need to provide greater community services and expect net losses to their tax bases. It is also important that different segments of the elderly population are not "mismatched" with the kinds of services, support and infrastructure that are available in the local community. These links between elderly residence and community context will continue to evolve as generations of middle-aged adults age into their elderly years – either in their existing communities or in new ones.

It is important in examining elderly population redistributions to not overemphasize the role of elderly migration. Typically, the elderly migration rate is small compared to the whole population. In any given year about one-fifth of working aged Americans make a residential move. By contrast, only 6 percent of the elderly relocate, and most of these moves are local moves. Slightly more than 1 percent of the elderly population moves into a different state in any given year. The migration of the elderly is important for specific "retirement magnets" – states, communities and regions that have special attractions for elderly residents. Small migration streams of elderly from a variety of places descend upon a small number of destinations where their impact is significant. However, on the whole, the growth or decline of the elderly population in most communities is less reliant on migration than the simple "aging-in-place" of existing residents.[14]

Elderly growth resulting from substantial aging-in-place or, in retirement magnet areas, migration tends to be associated with demographically attractive segments of the elderly population. Migration tends to select on the "best and brightest" of the resident population.[15] In other words, those who move tend to be those with the most resources. By far, the largest elderly migration flows are made up of educated, relatively well-off young-elderly married couples.[16]

Aging-in-place will always result in a growing elderly population when the number of persons entering into elderhood – turning age 65 in any given period – exceeds the number of deaths and outmigrants. Aging-in-place is fairly pervasive, especially during periods when there are large cohorts about to enter their elderly years. It will be especially common after 2011, when the baby boomers – located in all parts of the country – begin turning 65. In contrast, only a small number of areas have recently experienced elderly population decline

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[14] William H. Frey, "Elderly Demographic Profiles of US States: 'New Elderly Births,' Migration and Immigration Impacts," *The Gerontologist*, Vol. 35(6), 1995, pp. 761-770.

[15] Larry H. Long, *Migration and Residential Mobility in the United States* (New York: Russell Sage, 1988).

[16] These flows tend to dominate counter-flows of more dependent elderly who tend to flow in the reverse direction as failing health and diminishing financial support serves to motivate a move back to familiar family and kinship networks. See Eugene Litwak and Charles F. Longino, Jr. "Migration Patterns among the Elderly: A Developmental Perspective," *The Gerontologist*, Vol. 27 (1987), pp. 266-272.

due to greater elderly outmigration and mortality than aging-in-place; these tend to be rural areas that have not grown for many years, and, less commonly, central cities whose populations are declining severely.[17]

Migration selectivity is also relevant to the contributions of the aging-in-place population. Regions and communities with large soon-to-become elderly populations are the areas that successfully attracted large numbers of migrants with "good demographics" during their working years. These areas tend to be located in growing parts of the country such as the sunbelt and in growing parts of metropolitan areas – typically selected suburbs.[18]

Regions and Metropolitan Areas

The current distribution of the elderly population across broad regions and metropolitan areas of the United States does not differ that much from the rest of the population (see Table 7, left panel). Most elderly and non-elderly tend to live in the sunbelt, especially the South Atlantic part of the South, and both tend to live disproportionately in large metropolitan areas – those with populations exceeding one million. Compared with the younger population, the elderly tend to be over-represented in the Northeast and the South Atlantic portion of the South.

The Northeast's elderly representation is essentially a remnant of the past since this region's non-elderly population has in recent decades been more likely to relocate to other regions. The South Atlantic elderly concentration, on the other hand, reflects the strong and concentrated elderly migration to this region, especially Florida. Across the metropolitan spectrum, the elderly in past decades have been more likely to either remain in or move

[17] William H. Frey, "Mature Markets – Elderly Growth Patterns in US Counties," *Population Studies Center Research Report* No. 96-270 (Ann Arbor, MI: University of Michigan Population Studies Center), and Glenn V. Fuguitt, Richard M. Gibson, Calvin L. Beale and Stephen J. Tordella, "Recent Elderly Population Change in Nonmetropolitan Areas," Department of Rural Sociology, University of Wisconsin-Madison, WI (unpublished), 1998.

[18] William H. Frey, "Elderly Demographic Profiles of US States," and Frey, "Mature Markets."

Table 7: Regional and Metropolitan Distribution of Elderly and Non-Elderly Population in U.S., and Change, 1980-1997

	1997 Distribution			1980-97 Percent Change (a)			Percent 65+ Within Area	
	Elderly	Non-Elderly	Difference*	Elderly	Non-Elderly	Difference*	1997	Change since 1980
NORTHEAST								
New England	6%	5%	1%	23%	6%	17%	14.0%	1.7%
Mid-Atlantic	16%	14%	2%	20%	2%	18%	14.2%	1.9%
MIDWEST								
East North Central	16%	16%	0%	25%	3%	22%	12.8%	2.0%
West North Central	7%	7%	0%	15%	7%	8%	13.6%	0.8%
SOUTH								
South Atlantic	19%	18%	1%	51%	28%	23%	13.7%	1.9%
East South Central	6%	6%	0%	24%	10%	14%	12.6%	1.3%
West South Central	9%	11%	-2%	32%	24%	8%	11.0%	0.6%
WEST								
Mountain	5%	6%	-1%	76%	42%	34%	11.3%	2.0%
Pacific	14%	16%	-2%	49%	33%	16%	11.3%	1.1%
TOTAL	100.0%	100.0%		33%	16%	17%	12.7%	1.5%
Large Metro	51%	55%	-4%	34%	19%	15%	11.9%	1.2%
Small Metro	26%	25%	1%	45%	17%	28%	13.0%	2.2%
Non-Metro	23%	20%	3%	21%	8%	13%	14.6%	1.4%
TOTAL	100.0%	100.0%		33%	16%	17%	12.7%	1.5%

(a) = [(1980-1997 Elderly Change) x 100]/(1980 Elderly Population) *Elderly minus Nonelderly

Source: Author's analysis of U.S. Census Bureau Decennial Censuses and Postcensal Estimate Data

toward smaller and nonmetropolitan areas than the younger population, which has shown fluctuating shifts across metropolitan and nonmetropolitan categories.[19]

The close alignment of elderly and non-elderly population distribution is due, in part, to elderly redistributions over the last two decades (see middle panel of Table 7, and top portion of Map 1). The growth of the elderly population through both migration and aging-in-place has been greatest in the Mountain West and in the South Atlantic states. A warm climate, low cost of living compared to the Northeast and other urbanized parts of the country, and other amenities have helped to make these states especially attractive to seniors. In contrast, a good part of the West, Midwest and Northeast have exhibited the slowest elderly gains.

A useful statistic for showing the prominence of the elderly population in an area is the percent of the population composed of elderly people (right panel of Table 7, and bottom part of Map 1). When examining this statistic, one should be aware that a high "percent elderly" does not necessarily suggest an attraction for elderly migrants or large aging-in-place population. It might simply indicate that there has been a long-term out-migration of the *younger* population, leaving disproportionate numbers of the less-mobile elderly behind. This is the case for a large part of the nation's mid-section, ranging from North Dakota down through Oklahoma and Arkansas, as well as for a broad swath of the Northeast. Of the high "percent elderly" states designated in Map 1, only Florida has attracted large numbers of elderly. Most of the other elderly magnet states are also magnets for large numbers of younger people.

Just as with states, metropolitan areas that have shown the greatest elderly growth since 1980 are located in the sunbelt. Among the nation's largest metropolitan areas, Las Vegas, Orlando and Phoenix increased their elderly populations by over 100 percent over the past two decades (see Table 8). Significant jumps in older American populations are also evident in metro areas in Florida, Texas, several Atlantic coastal states and the Rocky Mountain States. Among smaller metropolitan areas, six of the top nine fastest-growing metro areas are located in Florida, and there is a fair representation of other smaller eastern seaboard metros, and well as communities in the West. These areas achieve much of their growth from migration of the elderly as well as from aging-in-place. Some of these areas have attracted a significant number of residents in their 50s, who relocated to these areas with an eye toward retiring there.[20]

Map 1

[19] William H. Frey, "Metropolitan Redistribution of the US Elderly: 1960-70, 1970-80, 1980-90" in Andrei Rogers (ed.) *Elderly Migration and Population Study* (London: Belhaven Press, 1992), pp. 123-142; and William H. Frey and Kao-Lee Liaw, "Immigrant Concentration and Domestic Migrant Dispersal: Is Movement to Nonmetropolitan Areas 'White Flight'?" *Professional Geographer*, Vol. 50(2) (1998), pp. 215-232.

[20] Regina M. Bures, "Migration and the Lifecourse: Is there a Retirement Transition?" *International Journal of Population Geography*, Vol. 3 (1997), pp. 109-119.

Table 8: Metro Area with Greatest Elderly Growth, 1980-97

Large Metros Areas (a) with Greatest Growth			Small Metro Areas with Greatest Growth		
Rank	Area	Growth	Rank	Area	Growth
1	Las Vegas, NV-AZ MSA	258%	1	Anchorage, AK MSA	256%
2	Orlando, FL MSA	94%	2	Naples, FL MSA	201%
3	Phoenix-Mesa, AZ MSA	92%	3	Fort Walton Beach, FL MSA	194%
4	West Palm Beach-Boca Raton, FL MSA	88%	4	Ocala, FL MSA	183%
5	Sacramento-Yolo, CA CMSA	78%	5	Myrtle Beach, SC MSA	171%
6	Houston-Galveston-Brazoria, TX CMSA	72%	6	Melbourne-Titusville-Palm Bay, FL MSA	160%
7	Austin-San Marcos, TX MSA	67%	7	Fort Pierce-Port St. Lucie, FL MSA	147%
8	Jacksonville, FL MSA	66%	8	Las Cruces, NM MSA	131%
9	Raleigh-Durham-Chapel Hill, NC MSA	66%	9	Punta Gorda, FL MSA	129%
10	San Diego, CA MSA	63%	10	Jacksonville, NC MSA	120%
11	Norfolk-Virginia Beach-Newport News, VA-NC MSA	63%	11	Fort Myers-Cape Coral, FL MSA	119%
12	San Antonio, TX MSA	62%	12	Wilmington, NC MSA	117%
13	Atlanta, GA MSA	62%	13	Honolulu, HI MSA	110%
14	Denver-Boulder-Greeley, CO CMSA	61%	14	Panama City, FL MSA	105%
15	Salt Lake City-Ogden, UT MSA	60%	15	El Paso, IX MSA	102%

(a) Large Metro areas are CMSAs, MSAs, and (in New England) NECMAs with populations greater than one million: OMB definitions of June 30, 1995.
Source: Author's analysis of U.S. Census Bureau Decennial Censuses and Postcensal Estimate Data

States with the fastest-growing elderly population have larger shares of seniors with favorable education, income, and household type profiles. This can be seen in Table 9 which contrasts recent demographic profiles of the "fast growing" elderly states (shown in Map 1) with those whose elderly populations are growing moderately and those that are growing slowly. It is clear that the elderly populations in the "fast growing" states have higher shares of married couples, college graduates, homeowners, and households earning more than $25,000 per year; and lower shares of poor households, female-headed households, high school dropouts, and members of the "oldest-old" elderly category. Because these states tend to be located in areas with large numbers of new immigrant minorities, they have disproportionately high numbers of Hispanic and Asian elderly as well. It is noteworthy that there is not a very strong distinction in elderly demographic profiles between the moderate-growing and slow-growing states. The regional location of elderly with good demographics is fairly sharply focused in areas with recent elderly growth.

Table 9: Elderly Demographic Profiles of Categories of States, 1997 (a)

	States with Elderly Growth Levels*		
	Fast Growing	Moderate Growing	Slow Growing
Age (%)			
65-74	56.6%	57.3%	55.4%
75-84	34.7%	33.7%	34.8%
85+	8.7%	9.0%	9.9%
Total	100.0%	100.0%	100.0%
Race Ethnicity			
% White	80.1%	85.8%	89.0%
% Black	7.4%	9.4%	6.9%
% Hispanic	7.7%	3.8%	2.5%
% Asian	4.3%	0.7%	1.1%
Household Type			
% Married Couples	58.5%	55.7%	54.5%
% Female-householder Family	7.6%	8.2%	8.0%
% Female-head Nonfamily	23.1%	26.0%	26.5%
Education			
% Less than High School	28.7%	38.4%	36.0%
% High School Grad	71.3%	61.6%	64.0%
% Some College+	39.0%	26.6%	28.1%
% Poverty Households	9.5%	11.4%	11.5%
%Household Income GT $25,000	40.5%	30.3%	31.0%
Percent Homeowners	83.2%	82.6%	80.0%

(a) Statistics for age, education pertain to persons age 65+; all other statistics pertain to households with householder age 65+.
* States identified as "top third," middle third" and "bottom third" on 1980-97 elderly growth (see Map 1)

Source: Author's analysis of U.S. Current Population Survey

Within Metro Areas: Cities and Suburbs

The importance of suburban elderly gains from aging-in-place, as well as from migration, is illustrated when one looks at the 30 counties with fastest-growing elderly populations since 1980 (see Table 10). While the list contains a fair representation of counties located in traditional Florida or South Atlantic "retiree magnets" (e.g., Daytona Beach, Tampa-St. Petersburg, Naples), nearly a third of these fastest-growing counties are located

in the suburbs of metropolitan areas that are not synonymous with retirement communities (e.g., suburbs of Atlanta, Washington, DC-Baltimore, Minneapolis-St. Paul). Much of this gain is due to the aging-in-place of suburbanites who relocated to these areas sometime during their working ages.

Table 10: Counties with Greatest Elderly Percent Change: 1980-1997
(among counties with greater than 2,000 Elderly in 1980)

Rank	County and State	Inside Metro Area	%Chg(1)	1980-97 Elderly % (2)	1997 Elderly % (2)
1.	Flagler County FL	Daytona Beach, FL MSA	595%	30.2%	
2.	Hernando County FL	Tampa-St. Petersburg-Clearwater, FL MSA	270%	32.0%	
3.	Washington County UT	*non-metro*	267%		16.2%
4.	Clark County NV	Las Vegas, NV-AZ MSA	259%		11.4%
5.	Anchorage Borough AK	Anchorage, AK MSA	256%		5.0%
6.	Columbia County GA	Augusta-Aiken, GA-SC MSA	239%	7.7%	
7.	Gwinnett County GA	Atlanta, GA MSA	233%	5.7%	
8.	Mohave County AZ	Las Vegas, NV-AZ MSA	217%		21.0%
9.	Beaufort County SC	*nonmetro*	209%	15.4%	
10.	Fort Bend County TX	Houston-Galveston-Brazoria, TX CMSA	209%	6.2%	
11.	Prince William Co. VA	Wash-Baltimore, DC-MD-VA-WV CMSA	205%	4.2%	
12.	Collier County FL	Naples, FL MSA	201%	25.2%	
13.	Santa Rosa County FL	Pensacola, FL MSA	198%	10.6%	
14.	Okaloosa County FL	Fort Walton Beach, FL MSA	194%	11.2%	
15.	Brunswick County NC	Wilmington, NC MSA	193%	17.1%	
16.	Anoka County MN	Minneapolis-St. Paul, MN-WI MSA	184%	8.1%	
17.	Marion County FL	Ocala, FL MSA	183%		24.9%
18.	Arapahoe County CO	Denver-Boulder-Greeley, CO CMSA	182%	9.1%	
19.	James City County VA	Norfolk-VABch-Newport News,VA-NC MSA	181%	13.9%	
20.	St. Lucie County FL	Fort Pierce-Port St. Lucia, FL MSA	180%	23.0%	
21.	Virginia Beach City VA	Norfolk-VABch-Newport News,VA-NC MSA	176%	7.6%	
22.	Hood County TX	Dallas-Fort Worth, TX CMSA		176%	19.4%
23.	Sarpy County NE	Omaha, NE-IA MSA		172%	6.7%
24.	Horry County SC	Myrtle Beach, SC MSA		171%	15.0%
25.	Howard County MD	Wash-Baltimore, DC-MD-VA-WV CMSA	169%	7.2%	
26.	Nassau County FL	Jacksonville, FL MSA		169%	12.7%
27.	Fairfax County VA	Wash-Baltimore, DC-MD-VA-WV CMSA		161%	7.7%
28.	St. Johns County FL	Jacksonville, FL MSA	160%	17.3%	
29.	Brevard County FL	Melbourne-Titusville-Palm Bay, FL MSA		160%	19.6%
30.	Clay County FL	Jacksonville, FL MSA		160%	9.5%

(1) Elderly % Change = (1997 Elderly Population minus 1980 Elderly Population) X 100 / 1980 Elderly Population.
(2) 1997 Elderly % = (1997 Elderly Population) X 100/ 1997 Total Population.
Source: Author's analysis of US Elderly Census Bureau Decennial Census and Postcensal Estimated Data.

Demographic profiles of suburban elderly are, generally, more favorable than those of central city elderly. Current Population Survey data for 1997 (Table 11) shows that the suburban elderly are more likely to live in married-couple households, have higher incomes, more education, and are more apt to be homeowners. Central cities have a somewhat higher percentage of the "oldest-old" despite the fact that they also have a larger share of minorities whose elderly populations tend to be younger than that of non-Hispanic whites.

Table 11: Demographic Profile of Cities and Suburbs, U.S. Elderly, 1997 (a)

	Central City*	Suburbs*
Age (%)		
65-74	54.1%	56.9%
75-84	35.5%	34.1%
85+	10.4%	9.0%
Total	100.0%	100.0%
Race Ethnicity		
% White	68.2%	89.3%
% Black	18.8%	4.2%
% Hispanic	8.6%	4.1%
% Asian	4.0%	2.1%
Household Type		
% Married Couples	48.8%	59.3%
% Female-householder Family	10.8%	7.1%
% Female-head Nonfamily	27.9%	23.6%
Education		
% Less than High School	35.9%	28.6%
% High School Grad	64.1%	71.4%
% Some College+	31.7%	34.5%
% Poverty Households	14.0%	7.4%
%Household Income GT $25,000	33.0%	39.8%
Percent Homeowners	71.7%	84.6%

(a) Statistics for age, education pertain to persons age 65+; all other statistics pertain to households with householder age 65+.
* Identified as Central City and Suburbs in 1997 Current Population Survey Public Use File (the geography of 14.3% of U.S. population is not identified due to confidentiality constraints)
Source: Author's analysis of U.S. Current Population Survey

This national comparison of central city and suburban populations camouflages important distinctions associated with individual metropolitan area's growth history, racial composition, and settlement pattern. For example, many older cities in the Northeast, Midwest and parts of the South tend to be "underbounded" in the sense that their cities have been less able to annex suburban territory over time. As a consequence, these areas often display sharper city-suburb distinctions since their city populations are less heterogeneous than those in newer parts of the country, and areas where more extensive annexation has been possible.[21] To provide a more refined comparison of city and suburban elderly profiles, statistics were compiled, based on 1990 census data, for

[21] William H. Frey and Alden Speare, Jr., *Regional and Metropolitan Growth and Decline in the United States* (New York: Russell Sage, 1988), Chapter 6.

the cities and suburbs of the 22 largest metropolitan areas (see Tables 12A and 12B).

It is clear that the stereotype of the city being the primary residence for the elderly, and the suburbs being the primary residence for younger populations at the family stage of the life cycle, is only barely valid. For most of these large metropolitan areas, the percentage of the city population 65 and older is slightly higher than the percentage of suburban population 65 and older. Significant differences exist, not in the older Northeastern areas, but in several southern and western metropolitan regions with rapid suburban growth. Two significant outliers are the retiree magnets of Tampa and Phoenix where the suburbs, rather than the central city, have a higher percentage of elderly.

Part of the anomaly of several older and northern metropolitan areas may be due to the large minority populations, with younger age structures, that live within the central city area. There is stronger tendency for African-Americans, Hispanics, and Asians to reside in central cities rather than suburbs – irrespective of age – as depicted in Figure 6. White elderly and non-elderly populations are much more likely to reside in the suburbs than either the elderly or non-elderly populations of each of the three major racial and ethnic groups. The selective suburbanization of white elderly and continued concentration of minorities in cities leads to something of a "racial generation gap" in the center of metropolitan areas with large minority populations. This can be seen in Figure 7 for Queens County, New York City, Philadelphia County, and Cook County, Illinois. In each of these, the white population is significantly "older" than the three minority populations. The young and working-aged populations in these counties are dominated by minority groups, whereas the over 65 population is largely white. The situation is even more extreme in Los Angeles County, where the white population is a substantial minority of the population in the younger ages.

Table 12A: Central City and Suburb Elderly Demographic Profiles, 1990: Largest Metropolitan Areas

Region	% 65+			Age 65+: % Age 65-74			Age 65+: %Married Couple			Age 65+: %Non Hispanic Whites		
Metro Areas*	Central City	Suburb	Difference**	Central City	Suburb	Difference	Central City	Suburb	Difference	Central City	Suburb	Difference
Northeast												
NYC-N.NJ-Long Island NY-NJ-CT CMSA	11%	12%	1%	59%	62%	3%	33%	47%	13%	68%	88%	20%
Phila.Wilm-Trenton,PA-NJ-DE-MDCMSA	14%	12%	-2%	59%	64%	5%	33%	47%	14%	66%	89%	23%
Boston-Lawrence-Salem, MA-NHCMSA	11%	12%	1%	59%	59%	1%	33%	42%	9%	79%	90%	11%
Pittsburgh-Beaver Valley, PA CMSA	18%	17%	-2%	58%	63%	4%	31%	44%	13%	76%	88%	12%
Midwest												
Chicago-Gary-Lake Co, IL-IN-WI CMSA	10%	10%	0%	60%	63%	3%	33%	48%	14%	68%	91%	23%
Detroit-Ann Arbor, MI CMSA	12%	11%	-1%	61%	64%	3%	33%	45%	12%	53%	90%	37%
Cleveland-Akron-Lorain, OH CMSA	13%	13%	0%	61%	63%	3%	33%	47%	13%	70%	90%	21%
Minneapolis-St. Paul, MN-WI MSA	12%	8%	-4%	54%	63%	8%	34%	49%	15%	85%	92%	6%
St. Louis, MO-IL MSA	15%	11%	-4%	54%	61%	7%	29%	48%	19%	69%	89%	20%
South												
Washington, DC-MD-VA MSA	12%	7%	-5%	59%	66%	7%	28%	48%	20%	53%	84%	31%
Dallas-Fort Worth, TX CMSA	8%	6%	-2%	61%	64%	3%	40%	48%	8%	79%	84%	5%
Houston-Galveston-Brazoria, TX CMSA	7%	5%	-2%	63%	67%	3%	40%	49%	9%	71%	80%	10%
Miami-Fort Lauderdale, FL CMSA	18%	14%	-4%	54%	56%	2%	39%	47%	5%	68%	84%	16%
Atlanta, GA MSA	11%	7%	-4%	55%	65%	10%	27%	47%	20%	59%	83%	24%
Baltimore, MD MSA	13%	10%	-3%	60%	65%	6%	31%	49%	18%	60%	88%	28%
Tampa-St.Petersburg-Clearwater,FL MSA	19%	21%	3%	54%	60%	6%	38%	54%	16%	81%	91%	9%
West												
LA-Anaheim-Riverside, CA CMSA	8%	8%	0%	61%	63%	2%	39%	47%	8%	75%	84%	10%
San Fran.-Oakland-San Jose, CA CMSA	10%	10%	0%	58%	63%	5%	38%	47%	9%	6%	85%	17%
Seattle-Tacoma, WA CMSA	14%	8%	-5%	56%	66%	10%	37%	51%	14%	81%	90%	10%
San Diego, CA CMSA	9%	10%	1%	61%	63%	2%	44%	52%	7%	83%	91%	7%
Phoenix, AZ MSA	9%	16%	6%	63%	59%	-4%	47%	57%	10%	87%	90%	3%
Denver-Boulder, CO CMSA	11%	7%	-4%	57%	67%	10%	36%	51%	15%	81%	90%	9%

*CMSA and MSA metropolitan areas and central cities defined by OMB on June 30, 1999 ** Suburb minus Central City
Source: Author's analysis of 1990 U.S. Census Summary Tape Files

Table 12B: Central City and Suburb Elderly Demographic Profiles, 1990: Largest Metropolitan Areas

Region	Age 65+: % Poverty HHS			Age 65+: % Renters			Age 65+: % Without Vehicle			Age 65+: %w/ MobilityLimitations		
Metro Areas*	Central City	Suburb	Difference**	Central City	Suburb	Difference	Central City	Suburb	Difference	Central City	Suburb	Difference
Northeast												
NYC-N.NJ-Long Island NY-NJ-CT CMSA	19%	9%	-11%	64%	25%	-39%	63%	22%	-42%	25%	18%	-7%
Phila.Wilm-Trenton,PA-NJ-DE-MDCMSA	19%	8%	-11%	28%	23%	-5%	48%	18%	-30%	26%	18%	-8%
Boston-Lawrence-Salem, MA-NHCMSA	15%	9%	-5%	51%	31%	-19%	42%	23%	-20%	23%	18%	-8%
Pittsburgh-Beaver Valley, PA CMSA	17%	11%	-5%	35%	22%	-14%	48%	25%	-23%	25%	21%	-5%
Midwest												
Chicago-Gary-Lake Co, IL-IN-WI CMSA	17%	7%	-10%	41%	21%	-20%	43%	18%	-28%	24%	18%	-6%
Detroit-Ann Arbor, MI CMSA	20%	9%	-11%	28%	23%	-4%	34%	17%	-17%	28%	20%	-8%
Cleveland-Akron-Lorain, OH CMSA	18%	7%	-11%	32%	23%	-9%	34%	18%	-17%	25%	19%	-7%
Minneapolis-St. Paul, MN-WI MSA	11%	9%	-3%	35%	27%	-8%	36%	18%	-18%	20%	16%	-4%
St. Louis, MO-IL MSA	19%	9%	-10%	41%	19%	-22%	40%	17%	-23%	26%	18%	-7%
South												
Washington, DC-MD-VA MSA	17%	7%	-9%	44%	24%	-20%	42%	17%	-25%	21%	17%	-4%
Dallas-Fort Worth, TX CMSA	16%	15%	-2%	26%	19%	-7%	19%	12%	-7%	21%	20%	-2%
Houston-Galveston-Brazoria, TX CMSA	20%	17%	-3%	28%	19%	-9%	22%	14%	-8%	23%	21%	-2%
Miami-Fort Lauderdale, FL CMSA	25%	13%	-12%	44%	19%	-25%	38%	22%	-16%	25%	20%	-5%
Atlanta, GA MSA	28%	15%	-13%	41%	21%	-21%	39%	15%	-23%	27%	22%	-5%
Baltimore, MD MSA	22%	9%	-13%	38%	23%	-14%	48%	17%	-31%	28%	18%	-10%
Tampa-St.Petersburg-Clearwater,FL MSA	16%	9%	-7%	26%	13%	-14%	27%	12%	-15%	20%	18%	-4%
West												
LA-Anaheim-Riverside, CA CMSA	11%	8%	-2%	39%	24%	-18%	25%	15%	-10%	22%	19%	-3%
San Fran.-Oakland-San Jose, CA CMSA	9%	7%	-3%	37%	23%	-14%	33%	15%	-17%	22%	17%	-5%
Seattle-Tacoma, WA CMSA	12%	7%	-4%	33%	21%	-12%	29%	12%	-16%	19%	16%	-3%
San Diego, CA CMSA	8%	8%	-2%	33%	22%	-11%	21%	13%	-8%	19%	16%	-2%
Phoenix, AZ MSA	11%	9%	-2%	25%	13%	-12%	16%	9%	-7%	17%	14%	-3%
Denver-Boulder, CO CMSA	15%	9%	-5%	34%	22%	-12%	28%	13%	-17%	20%	16%	-4%

*CMSA and MSA metropolitan areas and central cities defined by OMB on June 30, 1999 ** Suburb minus Central City

Source: Author's analysis of 1990 U.S. Census Summary Tape Files

Figure 6: Suburban Residence by Race-Ethnicity: Elderly and Non-Elderly, 1990

Figure 7: Age Profiles by Race-Ethnicity
Four "Central City" Counties, 1996

When focusing only on the elderly population's demographics, the most important city-suburb differences are in growing metropolitan areas. That is, in areas such as Washington, DC, Atlanta, Seattle-Tacoma, and Denver-Boulder, one finds a much higher concentration of elderly with "good demographics" in the suburbs than in the cities. This includes the elderly who are in the 65-74 age group, who are in married-couple households, and own their homes and one or more motor vehicle. In general, the elderly residents of suburbs in most of the metropolitan areas exhibit more desirable demographics than those in the cities.

Two indicators that are of special interest involve the potential isolation of the elderly who eventually will be unable to drive and may experience mobility limitations. The suburban elderly in growing southern and western metropolitan areas appear to have the highest level of automobile ownership (in the suburbs of Phoenix, only 9 percent of the elderly do not own a vehicle). The suburban residence preferences of the elderly in these growing metropolitan areas raises the question of whether they will still be able to function effectively when they reach the age when operation of an automobile may be difficult. In contrast, most of the older central cities with good public transportation systems are home to relatively high percentages of older Americans who do not own vehicles; in New York City, 63 percent do not do so.

A similar question may be emerging about elderly who report disability limitations in answering the census.[22] The census question on mobility or self-care limitation identifies people who report a health condition of six months or more that makes it difficult to go outside the home without assistance or take care of personal needs. In all areas, suburban elderly residents are less likely than central city residents to report mobility limitations. The issue of how well these suburbanites can cope as they age-in-place within more isolated suburban communities is of potential concern.

Communities within the Suburbs

In most large metropolitan areas, the broad term, "suburban," will mean any of the communities that exist within the metropolitan area, but outside the major central city. This simple "city-suburb" distinction is becoming increasingly problematic in light of the extremely heterogeneous patterns of suburban development in both older and newer metropolitan areas over the past several decades.[23] In older areas, the extended suburban development represents a continued drift that began earlier in the century. In newer areas, developed in a low density mode, central cities are less hemmed in, and the old city-suburb distinction is even less relevant. Suburban employment now clusters in various types of places: retail strip quarters, regional mall centers, and diversified office centers.[24]

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[22] Persons reporting either a mobility limitation or a self-care limitation in the 1990 census.

[23] In Frey and Speare, *Regional and Metropolitan Growth and Decline in the United States.* Chap. 6.

[24] Joel Garreau, *Edge City: Life on the New Frontier* (New York: Doubleday, 1991).

At the same time, inner suburban communities have become transformed into functional extensions of central cities.[25]

An "extended suburban typology," applied below to Detroit, Atlanta, and Los Angeles, distinguishes employment centers from residential suburbs and distinguishes close-in communities from those further out.[26]

The community types and their definitions are as follows:

1. *Major city.* The largest city (or pair of cities if the second city has at least 25,000 and at least one-third of the population of the largest city is adjacent).[27]

2. *Inner employment centers.* Places of at least 25,000 with more workers working in the place than living there, and places of at least 10,000 where more than 40 percent of the resident workers work in the place – and located within 10 miles of the center of the major city.

3. *Outer employment centers.* Places of at least 25,000 with more workers working in the place than living there, and places of at least 10,000 where more than 40 percent of the resident workers work in the place – and located 10 miles or more from the center of the major city.

4. *Inner residential suburbs*. Areas with populations of 10,000 or more that do not meet the above qualifications, but have densities of 1,000 or more; located within 10 miles of the center of the major city.

5. *Outer residential suburbs*. Areas with populations of 10,000 or more that do not meet the above qualifications but have densities of 1,000 or more; located 10 miles or more from the center of the major city.

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[25] Myron W. Orfield, *Metropolitics: A Regional Agenda for Community and Stability* (Washington, DC: The Brookings Institution – Lincoln Institute of Land Policy, 1997) and Rochelle L. Stanfield, "Splitsville: Older, Close-in Suburbs have discovered that they have little in common with booming new developments," *National Journal* Vol. 18, May 3, 1997, pp. 863-865.

[26] This typology grew from a paper commissioned by the US Census Bureau and Office of Management and Budget (William H. Frey and Alden Speare, Jr. "Metropolitan Areas as Functional Communities," in Donald Dahmann and James Fitzsimmons, eds., *Metropolitan and Nonmetropolitan Areas: New Approaches to Geographic Definition*. (Washington, DC: Population Division, US Bureau of the Census, 1995). This specific operationalization was developed and tested in: Alden Speare, Jr., *Changes in Urban Growth Patterns, 1980-90*. (Cambridge, MA: Lincoln Institute of Land Policy, 1993).

[27] The "major city" as defined here differs from the "central city," officially defined by the Office of Management and Budget and used in most Census Bureau publications. Atlanta is in a fast-growing region that is gaining largely from domestic migration, but the region consists of an older city that is highly segregated, and suburbs that have grown and expanded substantially in recent decades. Of the three, it has the sharpest city-suburb disparities on elderly demographic measures according to the findings discussed above. In this regard, its patterns are probably most emblematic of the directions that future elderly urban demographics will take. Major cities simply include the largest central city proper in each metropolitan area: Atlanta, Los Angeles, and Detroit. In contrast, central city designations, used in Tables 10 and 11, include several cities in the metropolitan area determined on the basis of considerations such as commuting and population density.

6. *Low density areas*. Places with fewer than 1,000 persons per square mile, residual parts of counties outside of places 10,000 or more, or whole counties with no places over 10,000.[28]

Each of the three metropolitan areas examined here differs in its history of suburban development, level of population growth, and racial and ethnic makeup. Los Angeles houses an ethnically diverse population with high levels of immigration and a growth history that does not sharply distinguish between central city and suburban demographic attributes. At the other extreme lies Detroit, a metropolitan area with modest population growth that is known to be one of the most racially segregated areas in the country, showing sharp distinctions between its largely black central city and its primarily white suburbs.[29] Atlanta also has a large African-American population, but it is located within a fast-growing metro area with an expanding suburban periphery.

The six zones of this extended typology for each of the metropolitan areas are depicted in Map 2. One feature of the Los Angeles area is its large number of Outer Centers and Outer Suburbs, representing the larger commuting fields in this low density metropolitan area. A distinguishing feature of Atlanta is that a large part of its population lies in the residual Low Density zone, reflecting its outward spread from an initially concentrated inner city area. Detroit, on the other hand, has a larger number of Inner Centers and Inner Suburbs than the other two, although there is also growth on its periphery.

Map 2: Extended Suburban Typology

[28] An extensive analysis of demographic profiles according to this typology, for these three metropolitan areas appears in William H. Frey and Douglas Geverdt, "Changing Suburban Demographics: Beyond the 'Black-White, City-Suburb' Typology," *Population Studies Center Research Report* No. 98-422 (Ann Arbor, MI: University of Michigan Population Studies Center).

[29] William H. Frey and Elaine Fielding. "Changing Urban Populations: Regional Restructuring, Racial Polarization, and Poverty Concentration," *Cityscape: A Journal of Policy Development and Research*, Vol. 1(2), June 1995, pp. 1-66; and William H. Frey and Reynolds Farley, "Latino, Asian and Black Segregation in US Metropolitan Areas: Are Multiethnic Metros Different?" *Demography*, Vol. 33(1) February, pp. 35-50.

The demographic profiles for each area's elderly population, according to this extended suburban typology, are presented in Tables 13A and 13B. The elderly share of the total population (percent 65+) in each zone varies sharply within the suburbs of Los Angeles and Detroit, much more so than in Atlanta. In Los Angeles and Detroit, the inner communities (both Inner Centers and Inner Suburbs) house a higher proportion of older Americans than their respective major cities. The large immigrant minority population in Los Angeles and the relatively younger age structure of blacks in Detroit account, in some measure, for this distinction. In these areas, the outer communities (Outer Centers, Outer Suburbs, and Low Density residual areas) have the fewest elderly, representing the outward expansion of the younger population. In Atlanta, the major distinction is between the metropolitan area's Low Density areas on the periphery, which are by far the fastest growing communities, and all of the other categories of suburbs.[30]

There is more uniformity in elderly *suburban* age compositions across metro areas. That is, it is the outer areas that contain the highest percentage of "young elderly" in each of these metros. This includes the Outer Suburbs and Low Density territories of Atlanta and Detroit, as well as the low density territory of Los Angeles. Thus, communities that house the youngest overall populations also house the newly-retired elderly populations.

Consistent with these "young elderly" demographics, the senior populations in these outer areas tend to have the highest share of married-couple households, home and vehicle ownership and are among the lowest in measures of poverty, female-headed households, and self care and mobility limitations. These areas also tend to be the whitest of all elderly zones within their respective metropolitan areas.

Yet there are distinct differences in the ways these attributes vary across other city and suburban categories. In Detroit, for example, there is a sharp distinction between the elderly demographics of the major city and all of the other suburban communities with respect to family type, poverty level, and vehicle ownership. A very large African-American population of elderly, concentrated in the city of Detroit, accounts for much of this variation. In Los Angeles and Atlanta, the demographic distinctions are more stratified between the city, some of the inner and outer communities, and the residual areas.

Atlanta fares less well than its inner suburbs or centers with respect to favorable elderly demographics than does Los Angeles. In contrast to Detroit, there is a sharp distinction between the elderly populations of Atlanta's inner communities and inner suburbs, on the one hand, and outer suburbs and residual territory, on the other. This seems to reflect

[30] Frey and Geverdt, "Changing Suburban Demographics," Table 9.

Table 13A: Elderly Demographic Profiles for Extended Suburban Profiles* 1990
Los Angeles, Atlanta and Detroit Metro Areas

	Age 65+						
	% Age 65+	% Age 65-74	Whites	Blacks	Hispanics	Asians	American Indians
Los Angeles							
Major City	7.9%	61.1%	61.5%	15.4%	13.6%	9.3%	0.3%
Inner Center	13.5%	55.9%	88.3%	2.0%	6.1%	3.3%	0.2%
Outer Center	7.8%	61.6%	79.1%	4.8%	9.7%	6.0%	0.4%
Inner Suburb	17.0%	51.8%	75.9%	18.3%	3.9%	1.8%	0.1%
Outer Suburb	7.6%	62.3%	75.0%	3.1%	14.8%	6.8%	0.4%
Low Density	9.4%	65.9%	87.6%	2.7%	7.0%	2.1%	0.6%
Total	8.0%	62.1%	74.7%	6.5%	12.0%	6.4%	0.4%
Atlanta							
Major City	11.4%	54.6%	44.0%	55.1%	0.8%	0.1%	0.1%
Inner Center	11.2%	63.2%	79.1%	19.5%	0.9%	0.2%	0.2%
Outer Center	11.1%	59.5%	81.6%	17.8%	0.3%	0.3%	0.0%
Inner Suburb	10.1%	58.8%	85.5%	13.0%	0.8%	0.7%	0.0%
Outer Suburb	9.6%	67.9%	97.1%	1.6%	0.7%	0.5%	0.0%
Low Density	6.3%	65.8%	90.3%	8.2%	0.6%	0.8%	0.1%
Total	7.6%	62.7%	80.5%	18.1%	0.6%	0.6%	0.1%
Detroit							
Major City	11.7%	61.5%	35.2%	62.7%	1.5%	0.3%	0.3%
Inner Center	14.7%	63.3%	93.8%	5.1%	0.6%	0.3%	0.2%
Outer Center	10.9%	60.0%	90.8%	7.2%	1.0%	0.8%	0.2%
Inner Suburb	15.5%	62.9%	95.4%	3.5%	0.6%	0.5%	0.1%
Outer Suburb	12.0%	64.9%	95.8%	2.9%	0.6%	0.6%	0.1%
Low Density	8.9%	64.8%	97.2%	1.8%	0.4%	0.4%	0.2%
Total	11.1%	63.2%	81.4%	17.2%	0.8%	0.5%	0.2%

* Typology discussed in text; major cities are not consistent with census defined “central cities”
Source: Author’s analysis of 1990 U.S. Census Summary Tape Files

Table 13B: Elderly Demographic Profiles for Extended Suburban Profiles* 1990
Los Angeles, Atlanta and Detroit Metro Areas

	Age 65+					
	% Married Couple HHS	% Female Head HHS	% Poverty HHS	% Renters	% Without Vehicle	% With Mobility Limitations
Los Angeles						
Major City	38.3%	9.5%	11.1%	43.1%	27.9%	22.5%
Inner Center	38.2%	5.8%	9.1%	46.2%	25.0%	18.3%
Outer Center	42.4%	8.0%	8.7%	29.6%	18.2%	19.4%
Inner Suburb	30.7%	5.3%	9.7%	62.6%	38.8%	25.1%
Outer Suburb	46.3%	8.3%	8.2%	23.9%	16.7%	19.2%
Low Density	53.7%	5.4%	8.1%	15.8%	9.2%	16.5%
Total	44.0%	8.0%	9.1%	29.9%	19.3%	19.7%
Atlanta						
Major City	26.9%	15.4%	28.5%	41.3%	40.0%	27.0%
Inner Center	40.3%	10.8%	17.7%	24.3%	20.3%	22.1%
Outer Center	33.8%	10.3%	19.9%	40.4%	25.9%	23.6%
Inner Suburb	37.1%	10.7%	12.1%	32.2%	23.1%	24.3%
Outer Suburb	51.8%	6.3%	6.7%	24.5%	12.2%	16.9%
Low Density	49.4%	9.8%	15.6%	17.6%	13.9%	22.2%
Total	42.5%	10.9%	17.7%	25.7%	21.0%	23.0%
Detroit						
Major City	31.0%	15.3%	22.1%	28.4%	37.2%	29.7%
Inner Center	42.1%	9.8%	10.3%	20.3%	21.5%	21.6%
Outer Center	41.2%	7.6%	10.7%	35.6%	20.6%	20.8%
Inner Suburb	40.6%	10.3%	9.5%	18.8%	20.0%	19.9%
Outer Suburb	43.4%	8.7%	8.8%	26.6%	18.4%	20.1%
Low Density	48.7%	7.4%	8.0%	19.2%	12.9%	19.0%
Total	41.3%	10.0%	12.1%	24.7%	22.0%	22.2%

* Typology discussed in text; major cities are not consistent with census defined “central cities”
Source: Author’s analysis of 1990 U.S. Census Summary Tape Files

the selective areas of growth in the area, as well as the presence of larger African-American populations in three of the suburban zones.

These distinctions shown for three selected metropolitan areas make plain that any characterizations about "the elderly in the suburbs" can lead to broad misconceptions. It is clear that several suburban communities have elderly demographic profiles that resemble those of central cities with respect to family, housing and economic attributes. This points up the importance of forging political and jurisdictional alliances between these city and suburban communities that provide needed services for the larger numbers of dependent elderly in these communities. The profiles show that a more advantaged "young elderly" group comprises a dominant share of the elderly population in peripheral parts of metropolitan areas and also in selected inner suburban communities. In many cases, they live among younger families and working-aged populations. In other cases, they represent the beginning of the aging-in-place of middle-aged residents.

The fact that these young-elderly households are able to reside and function along with younger, working-aged families in parts of these metropolitan areas attests to their vitality, ample financial resources, and generally good health. An important issue to consider is whether they will continue to function in these relatively isolated, low density communities when they age into the middle-elderly and oldest-old stages of life. The general paucity of public transportation systems and other institutions located in older suburbs and inner cities will make their mobility more difficult. It is clear that today's younger elderly are not only moving, in large numbers, to growing regions of the country, but they are also heavily represented in the peripheral, fast-growing zones of our major metropolitan areas.

V. IMPLICATIONS FOR CITIES AND SUBURBS

The overriding purpose of this paper has been to point out current and place-based implications of aging demographic trends in America. This contrasts with much of the policy literature, which is dominated by a national perspective in anticipation of the baby boom's future effects on federal entitlement programs. We argue here that there are significant demographic divisions that already exist among America's elderly that deserve immediate attention. The increased numbers and concentration of "less privileged" elderly – those in their late seventies and eighties who are economically vulnerable and prone to disability, widows heading households at poverty or near-poverty levels, persons dependent upon public social services, health services and transportation for their general well being, and low income minorities – pose important challenges for the communities in which they live.

The "aging-in-place" phenomenon continues to generate these inequalities across space because only a subset of the elderly population has the motivation and resources to relocate to retirement communities that are often highlighted by the popular press. A lot of communities that attract these more "demographically advantaged" segments of the senior population – educated "young elderly" married couples in good health – will see a rise in the consumption of local services, net gains to their community tax bases, and the involvement of an energetic, active population. By contrast, areas in many central cities and inner suburbs that tend to retain more demographically disadvantaged segments will see a demand for greater levels of community services than they are able to support.

Not all elderly who age-in-place create problems for their local communities. Indeed, vast stretches of the sunbelt have benefited greatly from aging-in-place because they attracted large numbers of professionals and high income households during their prime labor force years and retained these people as they aged into seniorhood. Similarly, suburban communities on the outskirts of today's growing metropolitan regions benefit greatly by retaining middle and upper income suburbanites who age-in-place there. Yet in large parts of the Midwest and in many city and inner suburban communities, one finds the aging-in-place of blue collar, less well-off elderly along with the "demographically disadvantaged" groups discussed above. These areas will require greater attention toward provision of public services for their elderly populations. Moreover, as these elderly residents continue to age, their needs arising from failing health, death of a spouse, and increased disabilities will proliferate in communities that will not have the appropriate infrastructure.

As the baby boomers age into elderhood, their local impacts on specific cities and suburban communities will be worthy of just as much attention as their national impacts on federal entitlement programs. The community contexts for baby boomers, with the exception of minority groups, will be largely suburban. Many of these will simply evolve as current communities "age-in-place" but there will also be a growth industry in the development of retirement communities designed to lure the better-off segments of these large boomer cohorts. The latter "yuppie elderly" will certainly be the target of localities in all parts of the country hoping to capture this demographically desirable group. Retirement communities will also develop within most metropolitan areas.

Thus, more so than today's elderly, the aging boomers will live in suburban communities that will be unprepared to deal with the special needs of seniors. In their working lives, these households depended heavily on automobile transportation for almost all daily activities. This will be less the case as they age. Moreover, compared to today's elderly, the baby boomer seniors have fewer children and smaller kinship networks to rely upon for informal assistance in times of sickness or other special needs.

What remains to be seen is what happens to the segments of the baby boomer elderly with fewest resources and significant service requirements. This will be especially important during the third and fourth decades of the new century, as these populations become more dependent, while they continue to reside in the dispersed settlement systems of today's urban America.

Given the strong "aging-in-place" tendencies of today's and tomorrow's elderly, we can readily predict where these problems will arise and begin planning for these populations' needs for transportation, social and medical services. Yet the difficulties that have always arisen within the suburbs with respect to issues of zoning, land use, and conflicting political interests may only serve to stymie needed policies.

The current demographic divisions among today's elderly population are creating significant challenges for policy makers in our older cities and inner suburbs. These challenges will only proliferate in the next two decades when even sharper divisions emerge across suburban communities in all parts of the country as the "age wave" of baby boomers comes into its own.

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