

## GENDER DIFFERENCES IN THE LIFE COURSE EFFECTS OF UNEMPLOYMENT ON MID- AND LATER-LIFE HEALTH

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There is substantial evidence that unemployment is associated with adverse health. Given different lifetime employment patterns, these effects may differ between men and women. However, current studies often only characterize unemployment as a one-time shock, and measure the effects on health shortly thereafter. Using unique data available from The National Longitudinal Study of Youth 1979, we characterize employment trajectories for a nationally-representative sample of American men and women for every week of their lives between the ages of 18 and 50 years old. We then explore associations between unemployment and a number of health conditions including cancer, hypertension, diabetes, and depression at age 50—when the onset of chronic health conditions often begins—to examine the cumulative effects of unemployment over the life course on later-life health. We find that men and women have different patterns of lifetime unemployment and that these patterns have strong associations with poorer health at age 50.

## WHO'S HURT MOST BY ECONOMIC SHOCK? EXPLORING HETEROGENEITY IN THE HEALTH-RELATED EFFECTS OF WEALTH LOSS

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Prior research finds evidence of an effect of negative economic shocks on health, but this growing area has not fully investigated variation in this effect. A large number of people from diverse backgrounds experience a substantial financial setback of some type, and differences related to one's gender, race/ethnicity, and socioeconomic status (SES) may influence the consequences of economic shocks on one's life such that the health-related effects of shocks vary systematically in the U.S. population. Thus, this study aims to identify the effects of multiple economic shocks on health in middle adulthood, and whether the effects of shocks on health vary by one's underlying propensity to experience the shock. The analysis uses newly developed statistical techniques from causal inference literature and over twenty-five years of biographical information from the NLSY-79. Results from the analysis help shed light on important variation in the association between negative economic shocks and health.

## PARENT AND CHILD FACTORS THAT PREDICT WHO HELPS YOUNG ADULT CHILDREN PAY FOR COLLEGE

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In recent decades, the cost of higher education has exceeded the pace of inflation while wages have stagnated or declined. As such, young adult children may increasingly look to their parents and other family members, including grandparents, to help them pay for college. We use data from the National Longitudinal Survey of Youth 1979 to determine who financially contributes to a young adult child's college education, restricting our sample to mid-life parents with at

least one biological child who attended a 2-year or 4-year college and completed the college expenditures module in 2014 (n=3,525). For each college-going child, parents reported who paid for the student's tuition – student, parents, grandparents, other family members, or a combination of these. Using multinomial logistic regression, we will estimate who paid for college as a function of parents' social and economic characteristics when the child was 16 and the child's gender and birth order.

## INFORMAL CAREGIVING AND HEALTH IN MIDDLE AND LATE ADULTHOOD

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With average life expectancy increasing, informal caregiving has become increasingly common among aging families. Much of the research in this area suggests that informal caregiving is associated with negative psychological and physical health outcomes for the caregiver. However, there is an emerging body of work indicating that these negative associations may be overstated, and that the associations may vary by gender and race. Using NLSY79 who completed Age 50 Health Module (n=7,844), we will examine how informal caregiving is associated with health in mid/late adulthood and how the association varies by race and gender of the caregiver. Preliminary results showed that caregivers (10.6% of the sample) were less likely to report good health than non-caregivers (OR=0.43, p<0.001) but African-American caregivers were more likely to report good health than other racial groups (OR=1.43, p<0.05). Our findings will contribute to better understanding of the role of informal caregiving in older adults' health.

## THE RELATIONSHIP BETWEEN FEMALE LABOR SUPPLY AND CAREGIVING OVER THE LIFE CYCLE

Alison Aughinbaugh, *BLS, Washington, District of Columbia, United States*

I examine the effects of caring for others on female labor supply over the life-cycle using a fixed effect model. The data come from the National Longitudinal Survey of Youth 1979 (NLSY79), which collects information about the care of each child during his first three years and the care provided to household members during a woman's 50s. The NLSY79 data show that women's labor supply drops around the time a child is born and then rises, with over 50 percent working by time their children reach age 2. In addition, these data show that during their 50s, about 9 percent of women provide care to someone living in their household and that these female caregivers spend about 40 hours per week providing care. Time spent in caregiving may affect time in the labor force, and hence the ability to invest in a career and accumulate work experience and wage growth.

## SESSION 5565 (SYMPOSIUM)

### ECONOMIC INEQUALITY OVER THE LIFE COURSE: CAUSES AND EFFECTS OF CUMULATIVE DIS/ADVANTAGE PROCESSES

Chair: Jessica Kelley

Co-Chair: Stephen Crystal

Discussant: Jessica Kelley

Economic inequality has grown rapidly in all age groups in the past several decades. In each successive cohort, the