

# Research findings from international comparisons with *SHARE*

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*RIETI-JSTAR Symposium, Tokyo, 12 December 2014*

# Outline

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1. **SHARE:** Not only **panel** and **X-disciplinary** like JSTAR and HRS, but also **X-national**
2. **Overview:** Understand causes and effects of **welfare state interventions** impacting life at older ages: Overview of lessons learned
3. **Three examples, refuting prejudices:**
  - health** around retirement
  - retirement** effects on health
  - intergenerational **cohesion** of aging societies

# EU Laboratory to evaluate social policies



## Wave 1 participation (2004):

**11 countries:** NL, DE, AT, DK, BE, FR, CH, SP, IT, GR, SE (+UK)

## Waves 2 and 3 (2006 and 08):

plus CZ, PL, IE, IL: 15 countries

Wave 3 specialty: SHARELIFE histories

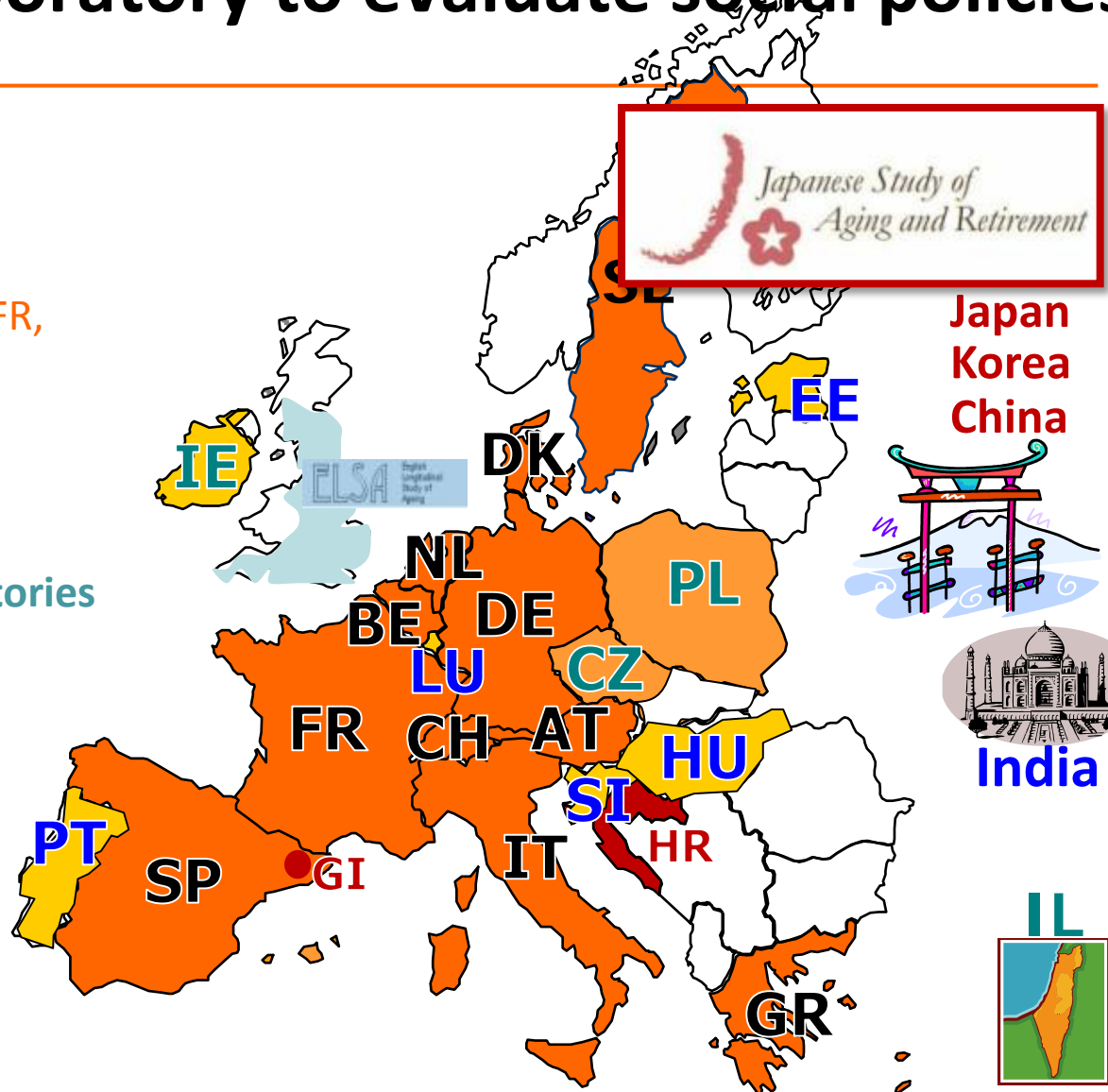
## Wave 4 participation (2010):

plus EE, LU, HU, SI, PT:

now **20 countries**

## Wave 5 finished (2012/13)

83,000 resps, 230,000 interviews  
from 21 countries/1 region

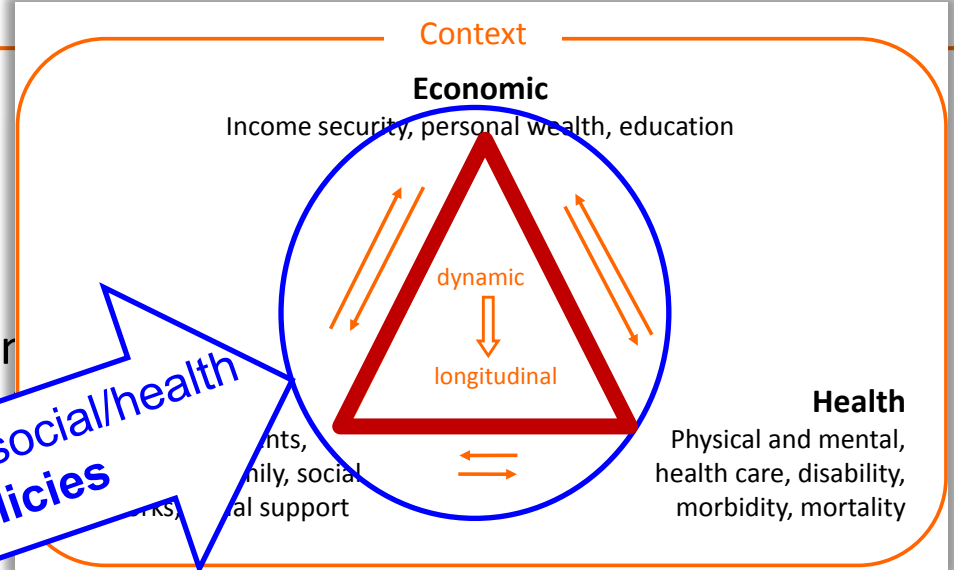


# Aims & principles

- **Aim:**

- Understand the **ageing process** in
- Basic research and fact-based

**Economic/social/health  
policies**



- **Principle 1:** Understand the **interactions** between health, labour force participation, and institutional conditions
- **Principle 2: Longitudinal** – since ageing is a process, not a state
- **Principle 3:** Use **cross-national variation** in policies, histories, cultures to understand causes and effects of welfare state interventions

# Methodology

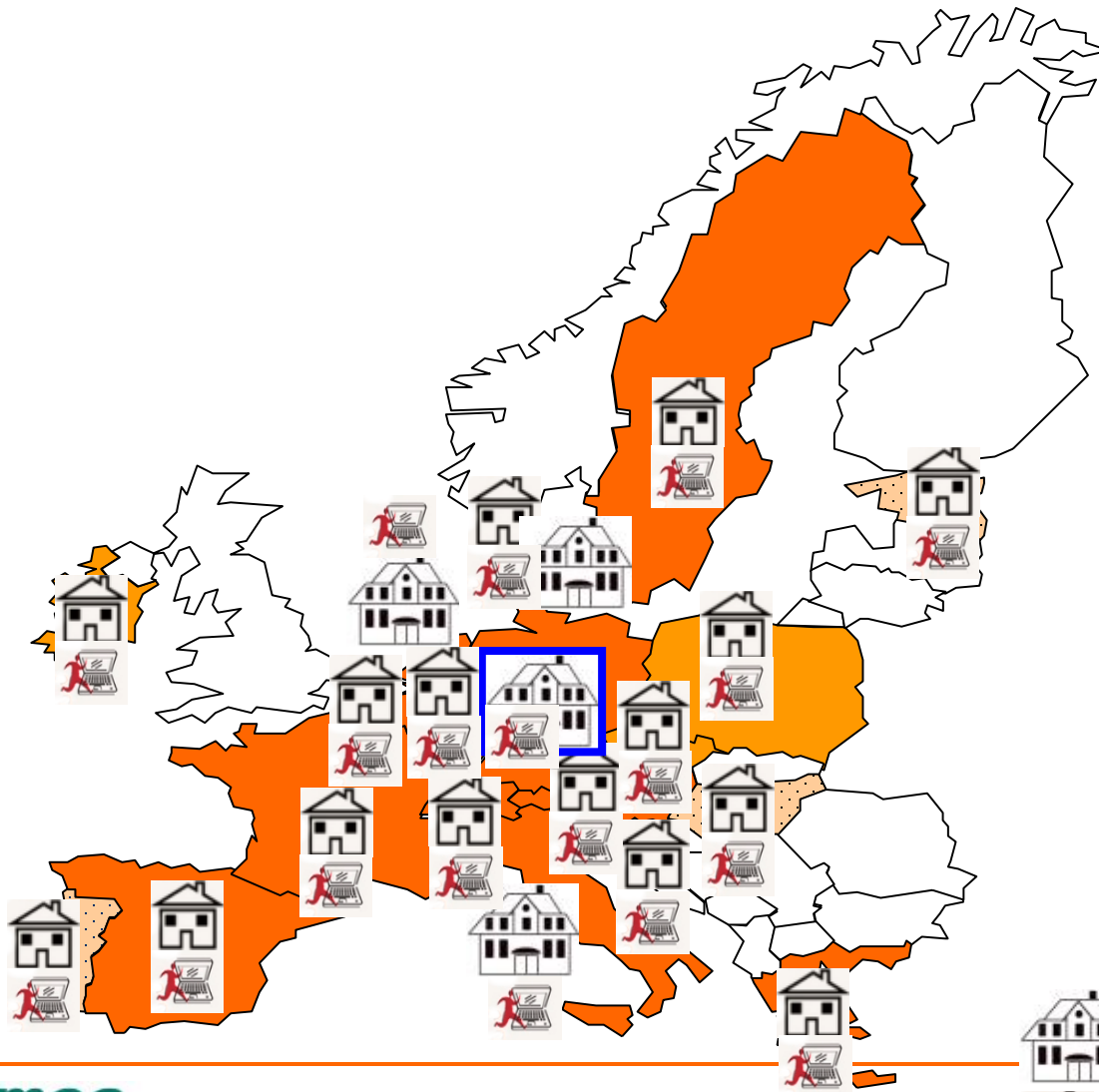
- ▶ Representative samples of **individuals age 50+** with spouse
- ▶ **Face-to-face interviews** by trained interviewers
- ▶ Broad range of **questions, measurements and tests:**
  - ▶ **Health:** subjective-objective (self-report, ADL/IADL, conditions, physical performance, biomarkers incl. dried blood), physical-mental (cognition, MMSE, CES-D, Euro-D), health behaviors, health utilization and insurance coverage
  - ▶ **Socio-economic status:** labor force participation, retirement, income (amount and sources), wealth, consumption, pension claims, expectations, well-being
  - ▶ **Social participation:** activities (volunteering), family and social networks (size and intensity), help (time, money)

**Distinguish methodological effects  
from genuine policy effects:**

Ex ante / ex post  
harmonization

- Different institutions and methods
- Different languages
- Different interpretations

# Cross national organisation



5 main nodes

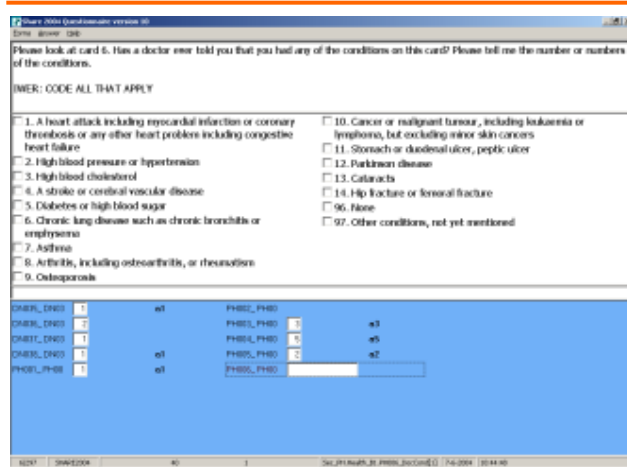


more than 22 scientific partner  
institutions & ~160 scientists



23 survey agencies &  
about 2000 interviewers

# Cross national comparability



SHARE Min Questionnaire version 10.0

Please look at card 6. Has a doctor ever told you that you had any of the conditions on this card? Please tell me the number or numbers of the conditions.

ENTER: CODE ALL THAT APPLY

1. A heart attack including myocardial infarction or coronary thrombosis or any other heart problem including congestive heart failure  
2. High blood pressure or hypertension  
3. High blood cholesterol  
4. A stroke or cerebral vascular disease  
5. Diabetes or high blood sugar  
6. Chronic lung disease such as chronic bronchitis or emphysema  
7. Asthma  
8. Arthritis, including osteoarthritis, or rheumatism  
9. Osteoporosis  
10. Cancer or malignant tumour, including leukaemia or lymphoma, but excluding minor skin cancers  
11. Stomach or duodenal ulcer, peptic ulcer  
12. Parkinson disease  
13. Cataracts  
14. Hip fracture or femoral fracture  
15. None  
16. Other conditions, not yet mentioned

SHARE_DMG	a1	PHYS_PHS	a2
SHARE_DMG	1	PHYS_PHS	1
SHARE_DMG	2	PHYS_PHS	1
SHARE_DMG	3	PHYS_PHS	1
SHARE_DMG	4	PHYS_PHS	1
SHARE_DMG	5	PHYS_PHS	1
SHARE_DMG	6	PHYS_PHS	1
SHARE_DMG	7	PHYS_PHS	1
SHARE_DMG	8	PHYS_PHS	1
SHARE_DMG	9	PHYS_PHS	1

## Language Management Utility

### Make a selection:

Select section to view:

CV Household demographics  
GM Household demographics (Main sections)  
DN Demographics and networks  
PH Physical health  
BR Behavioral risk  
CF Cognitive function  
MH Mental health  
HC Health care  
EP Employment and pensions  
GS Grip strength  
WS Walking speed  
CH Children  
SP Social support  
FT Financial transfers  
HO Housing  
HH Household income  
CO Consumption  
AS Assets  
AC Activities  
EX Expectations  
IV Interviewer  
-----  
Other instrument texts

Select language: German (Switzerland)

Options: ☐ show all sections

Search text:

View

**Ex ante harmonization:**  
Internet based translation tool

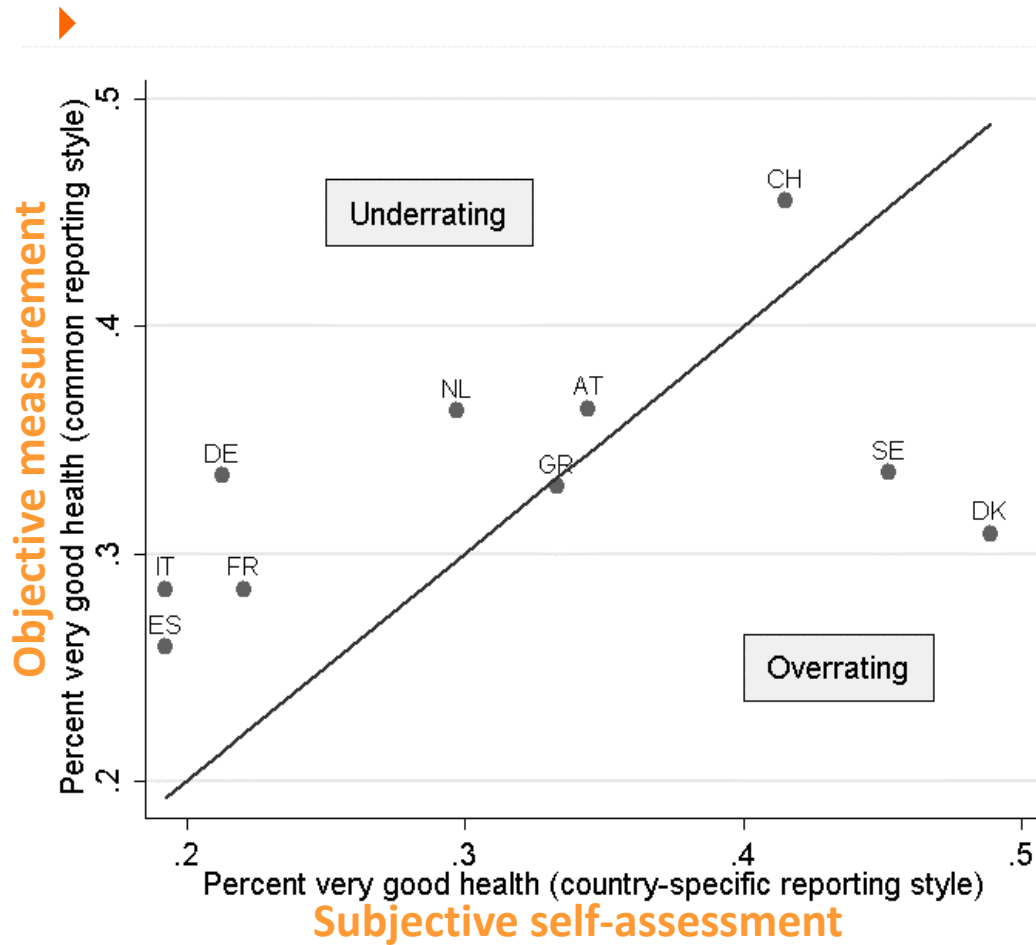
**Ex ante harmonisation:**  
Survey instrument  
to conduct Computer Assisted  
Personal Interviews (CAPI)



Module	Variable	AT	BE_FR	BE_NL	DK	FR	DE	GR	IT	NL	ES	SE	CH_FR	CH_DE
CV	CV001	AT	BE_FR	BE_NL	DK	FR	DE	GR	IT	NL	ES	SE	CH_FR	CH_DE
	CV008									C				
	CV022	T												
	CV018													
	CV027													
DN	DN009	AT	BE_FR	BE_NL	DK	FR	DE	GR	IT	NL	ES	SE	CH_FR	CH_DE
	DN010	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS
	DN012	CS	CS	CS	CS	CS	CS	CS	CS	-	CS	CS	CS	CS
	DN013									-				
	DN014	C				C, TW		C		C		C		
	DN016	-				-		T		T		T		
	DN021	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS	CS
	DN023	CS	CS	CS	CS	CS	CS	CS	CS	-	CS	CS	CS	CS
	DN024									-				
	DN030									C				

**Ex post harmonization:**  
Country & wave specifics online overview

# Cross national comparability



Source: Jürges, 2006



VolkswagenStiftung DFG  
National Institute  
on Aging

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3. **Three examples: (refuting prejudices)**
  - health around retirement
  - intergenerational cohesion of aging societies
  - retirement effects on health

# Selected new publications 2013

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## ▶ Health & Health Care

- ▶ Paccagnella, O., V. Rebba and G. Weber. **Voluntary private health care insurance** among the over fifties in Europe: A comparative analysis of SHARE data. Health Economics.
- ▶ Schröder, M. **Jobless now, sick later?** Investigating the long-term consequences of involuntary job loss on health. Advances in Life Course Research.

## ▶ Life Course

- ▶ Deindl, C. The influence of **living conditions in early life on satisfaction in old age**. Advances in Life Course Research.
- ▶ Schaan, B. **Widowhood and depression** among older Europeans - the role of gender, caregiving, marital quality, and regional context. The Journals of Gerontology Series B: Psychological Sciences and Social Sciences.

# Selected new publications 2013

## ▶ Retirement

- ▶ Reinhardt, J.D., M. Wahrendorf and J. Siegrist. Socioeconomic position, **psychosocial work environment and disability** in an ageing workforce. Occupational and Environmental Medicine.
- ▶ Brugiavini, A., G. Pasini and E. Trevisan. The direct **impact of maternity benefits** on leave taking: Evidence from complete fertility histories. Advances in Life Course Research.
- ▶ Börsch-Supan, A., and M. Schuth, **Early retirement, mental health and social networks**, In: David A. Wise (ed.), Discoveries in the Economics of Aging, University of Chicago Press.

## ▶ Socio-Economics

- ▶ Chen, M.K. The effect of **language on economic behavior**: Evidence from savings rates, health behaviors, and retirement assets. American Economic Review.

# Selected new publications 2013

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## ▶ Family & Social Networks

- ▶ Lyberaki, A., Tinios, P., Mimis, A. and Georgiadis, T. Mapping population aging in Europe: how are **needs met by different family structures?**. Journal of Maps.
- ▶ Reinhold, S., T. Kneip and G. Bauer. The long run consequences of unilateral **divorce laws on children** — evidence from SHARELIFE. Journal of Population Economics.
- ▶ Brandt, M. and C. Deindl. **Intergenerational transfers** to adult children in Europe: Do social policies matter? Journal of Marriage and Family.

# Outline

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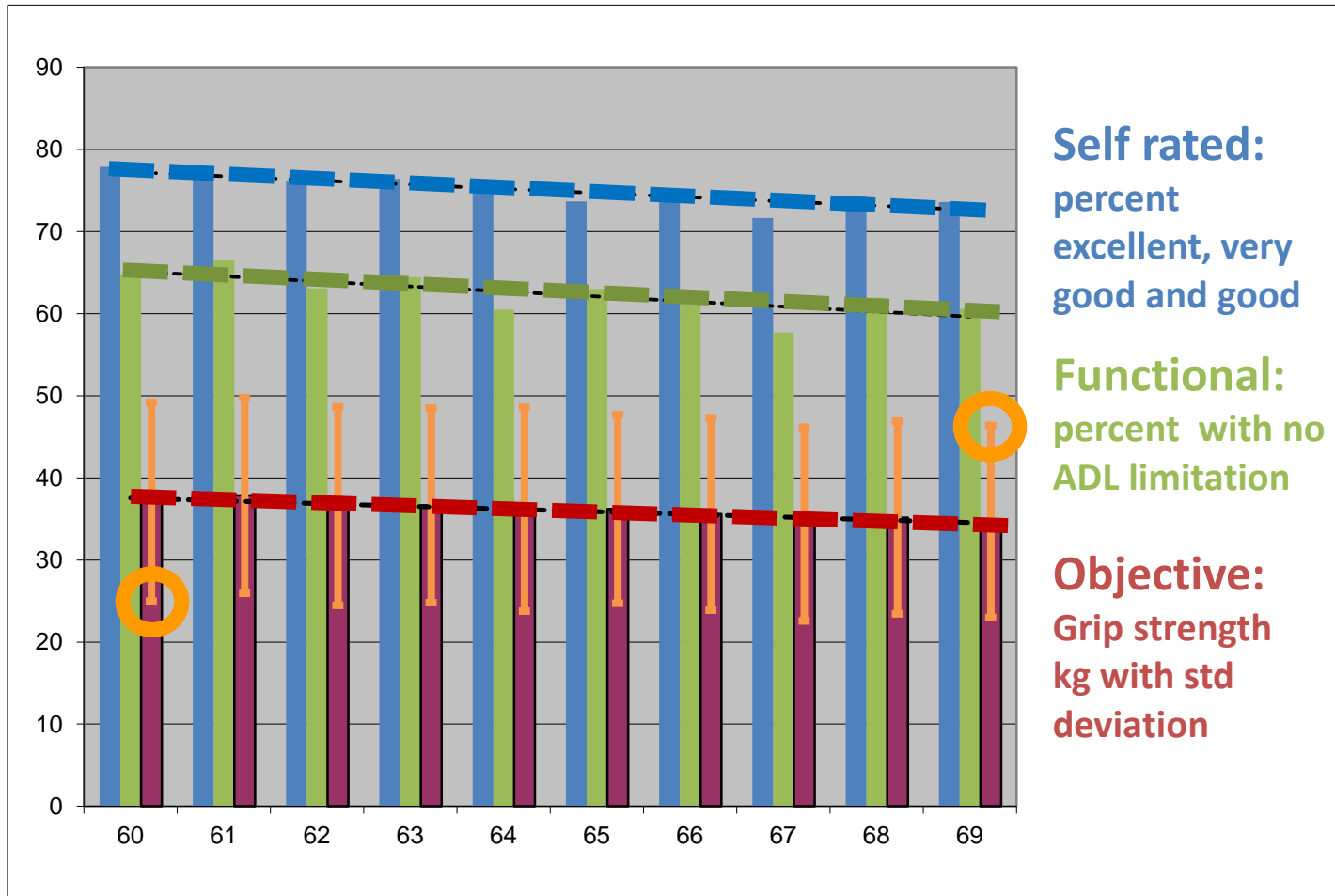
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# Prejudice 1: Health is insufficient...

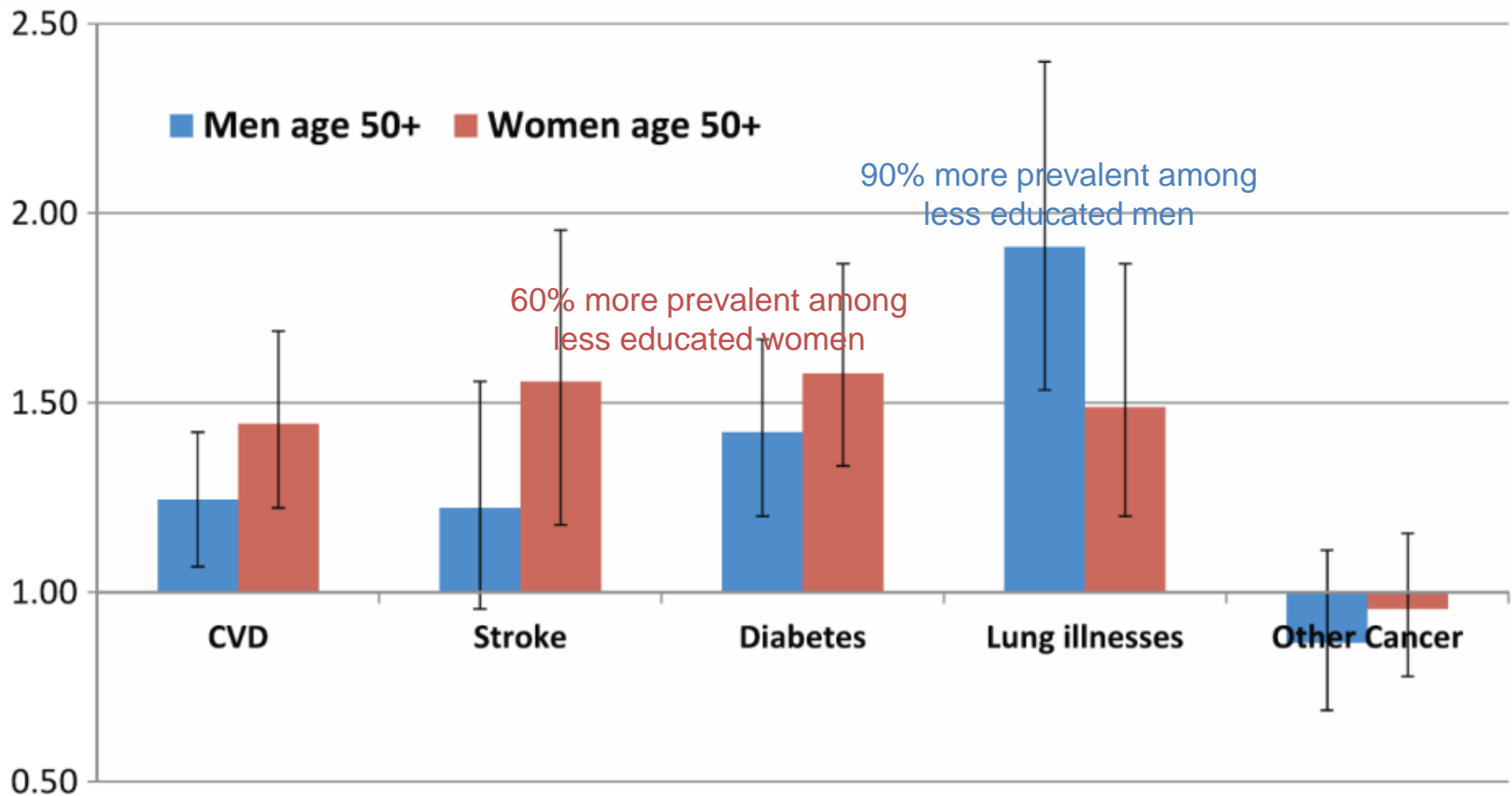
## Health at age 60-69 in Europe





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# But: socio-economic gradient



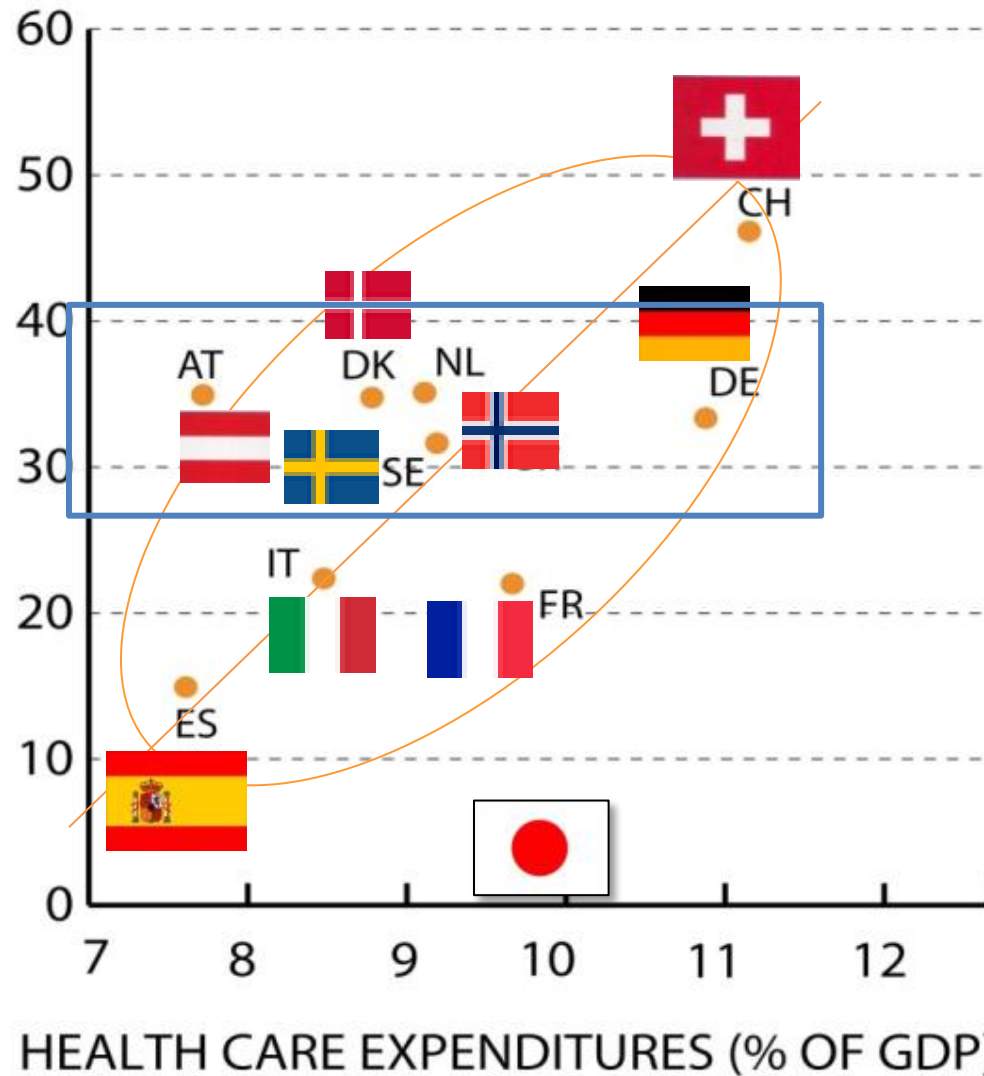
**Fig. 5.** Relative frequencies of illnesses by education in Europe. Source: [Avendano et al. \(2005\)](#)



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# Health care as (smart) investment

PERCENT  
VERY  
HEALTHY  
(objective  
functional  
measure)

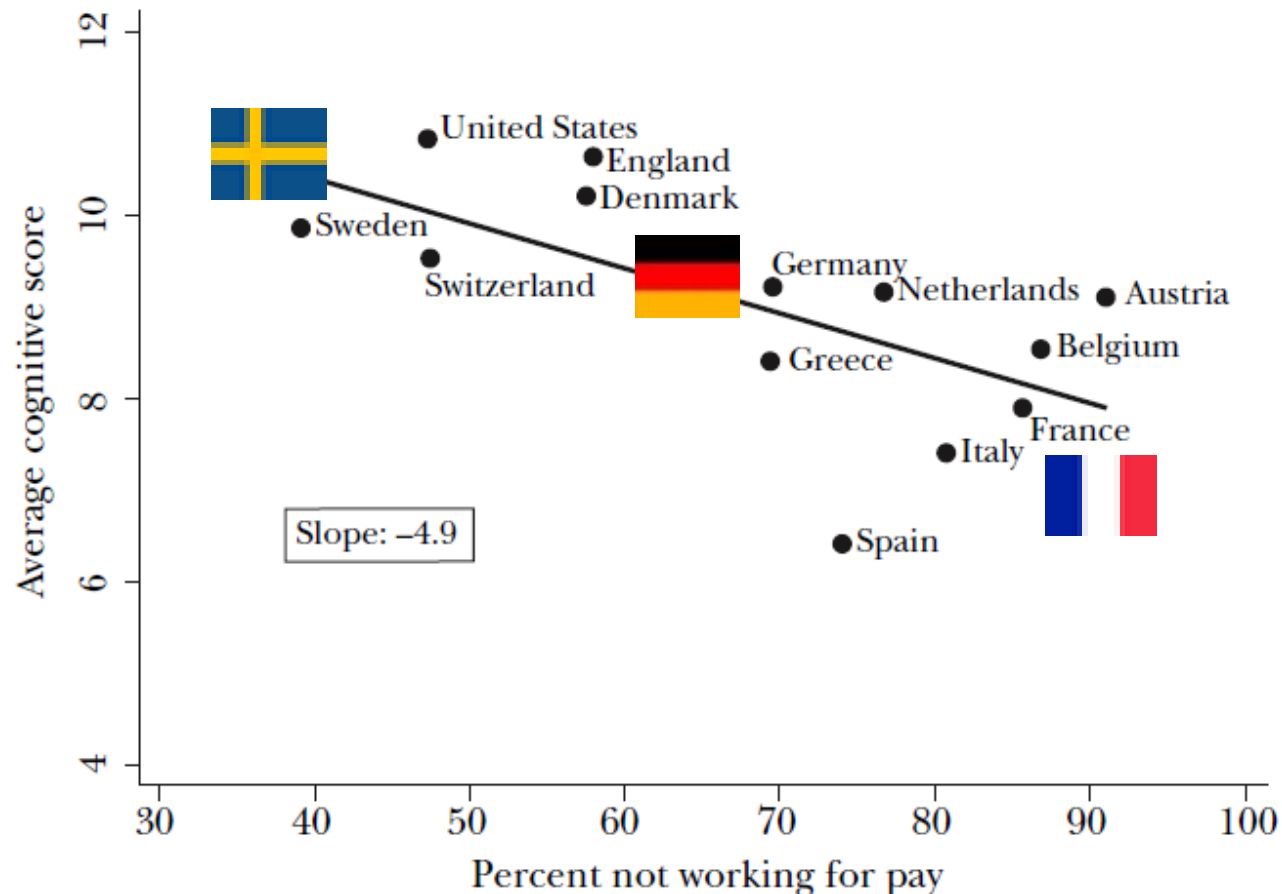




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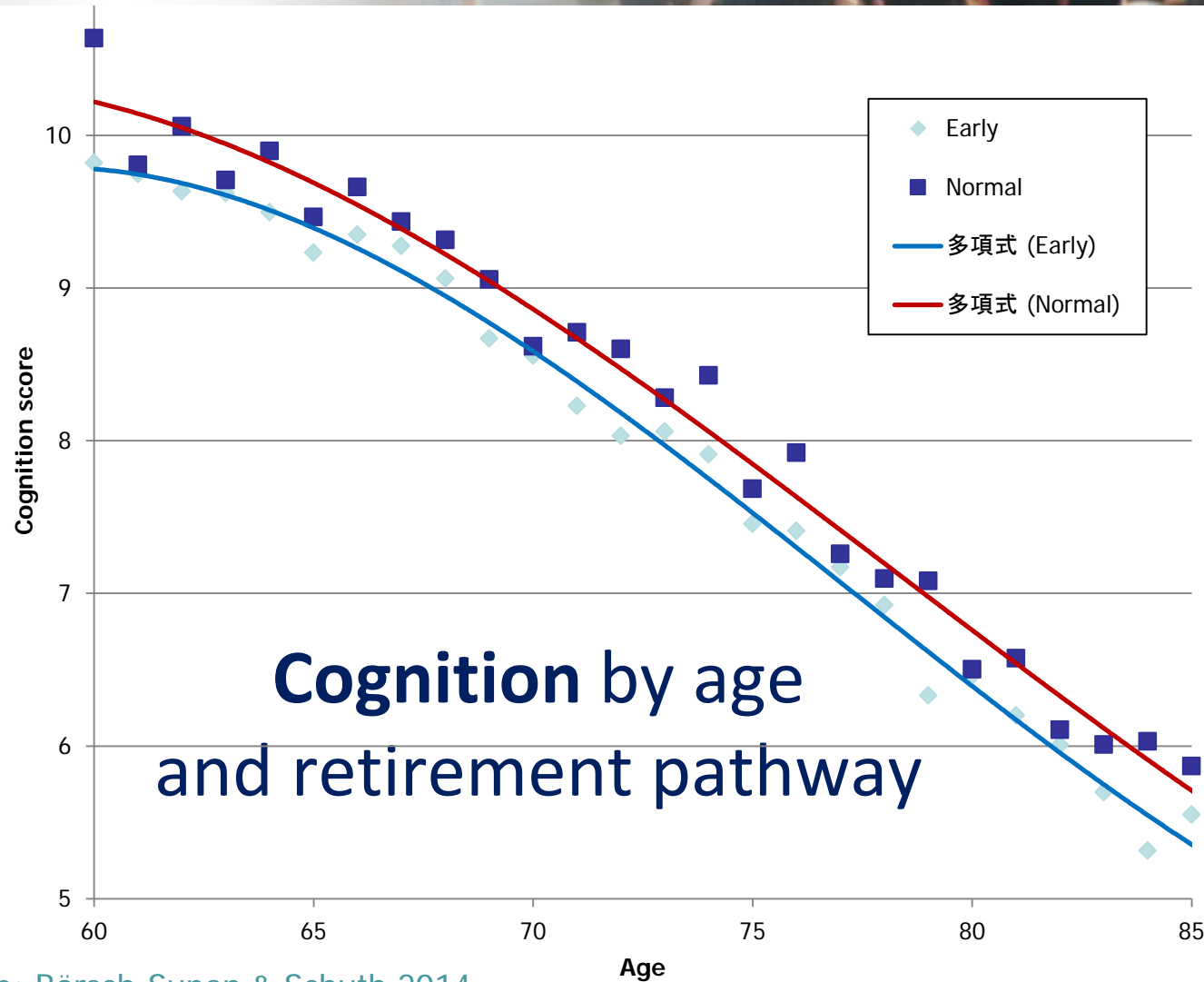
# Prejudice 2: Retirement is bliss...

**Cognition by Percent Not Working for Pay, 60–64 Year-Old Men and Women, Weighted**  
*(Rohwedder and Willis 2010 with SHARE data)*





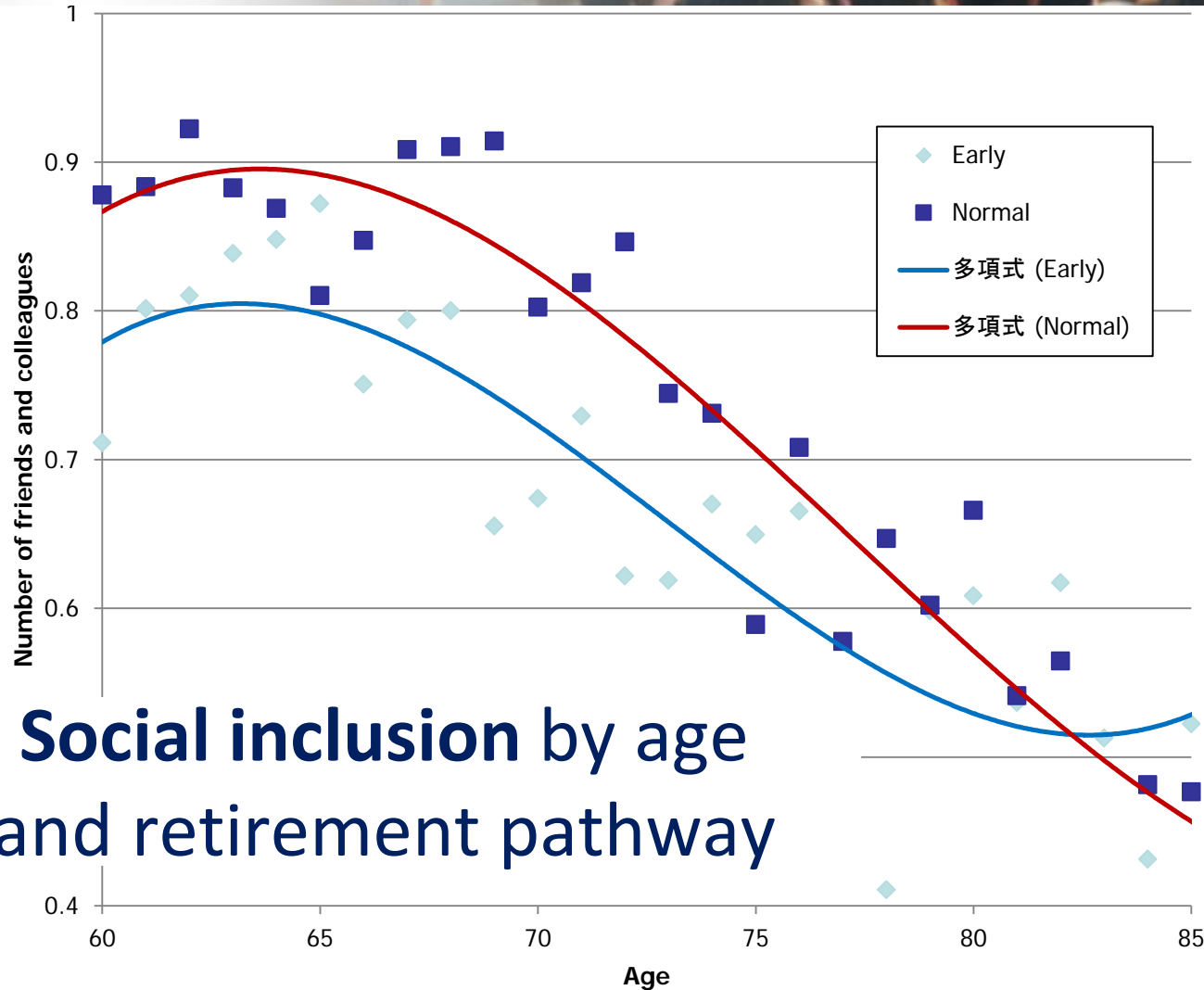
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Source: Börsch-Supan & Schuth 2014



**mea**



Source: Börsch-Supan & Schuth 2014

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# What is cause, what is effect?

## **1. Cognition -> Retirement:**

Those with low cognition tend to retire earlier

## **2. Retirement -> Cognition:**

Those who retire earlier loose their cognition faster

## **3. Cognition -> Social networks:**

Smart and succesful individuals have more friends

## **4. Social networks -> Cognition:**

Those who retire earlier loose their friends faster

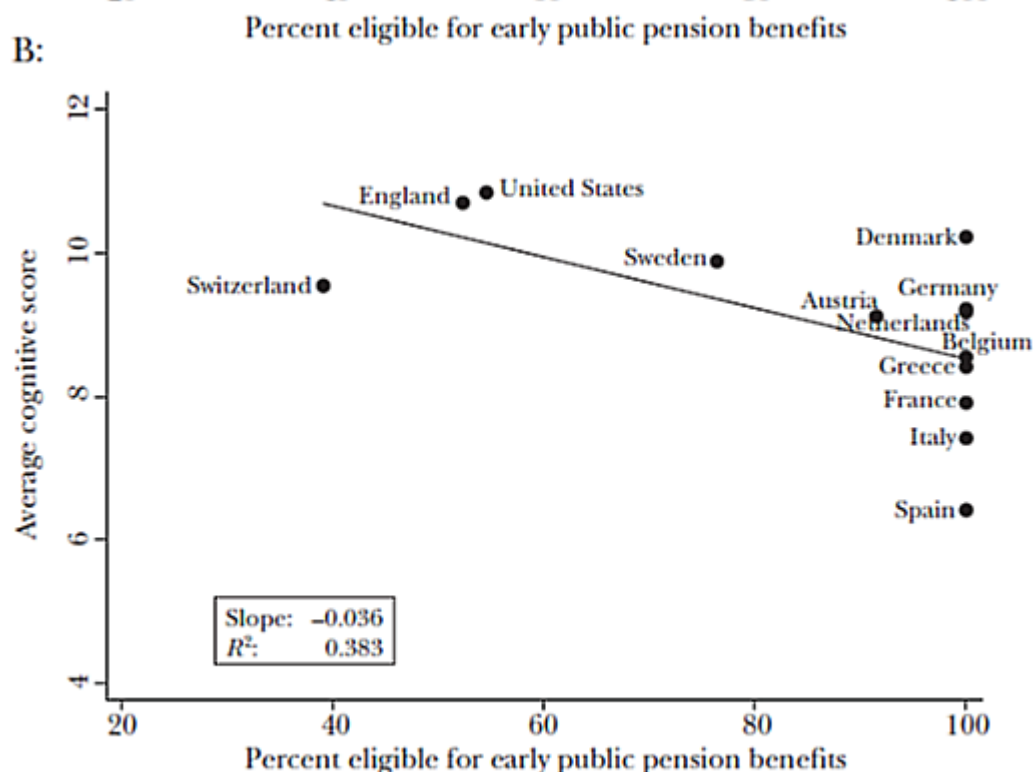
# The value of international variation

Instruments for years since early retirement:

- ▶ Time since eligible for early retirement
- ▶ Time since eligible for normal retirement

*Causal  
effect:*

*Exploit  
variation  
of early  
retirement  
rules in  
SHARE  
countries*



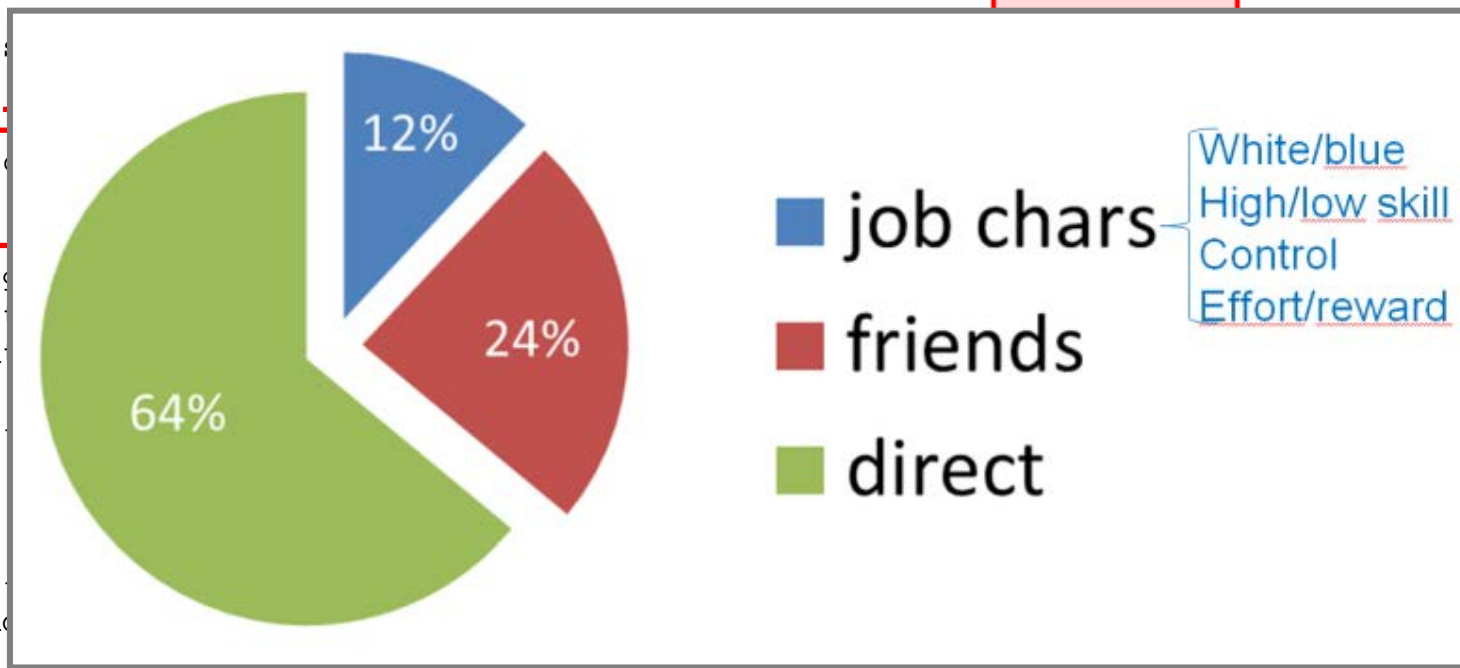
Instruments for number of non-family members in the social network:  
“social capital” at the regional level (NUTS-1)

- 1. Trust in other people among the population 50+**
  - ▶ separated by country and gender
  - ▶ Higher level of (aggregated) trust -> more social contacts
- 2. Population density at national level**
  - ▶ Higher population density -> more non-family social contacts?
  - ▶ Higher population densities create public distrust and increases need for privacy (Brueckner & Largey 2006, Collier 1998)

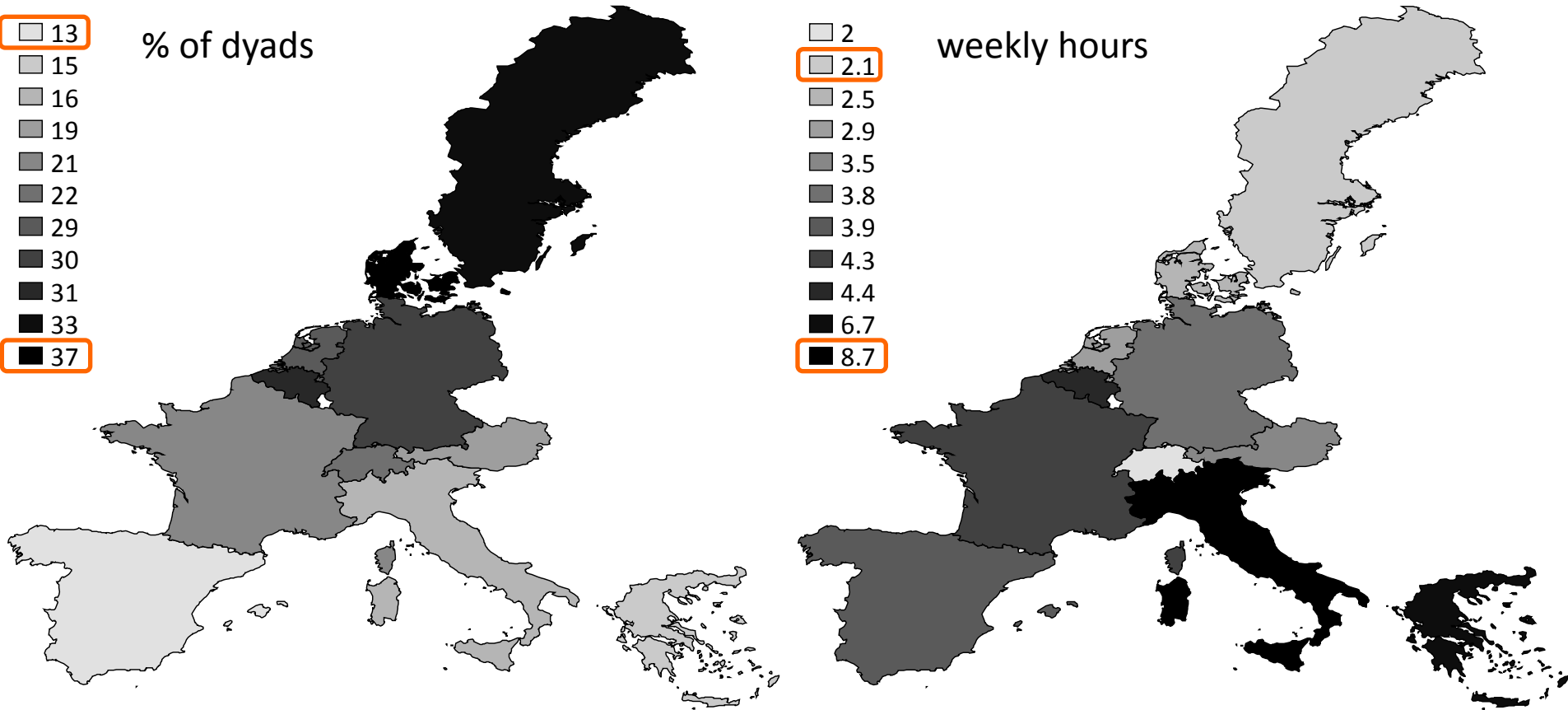
# Second stage: RET & SN -> COG

**Table 10:** Second stage IV-estimation:  
The effect of (early) retirement and social networks on cognition

	(1) cogn	(2) cogn	(3) cogn	(4) cogn
ERdist	-0.218*** (0.027)	-0.149 (0.099)	-0.259*** (0.084)	-0.185** (0.088)
NRdist				
sn_f				
Demog				
Heal				
Coun				
N				
F				
Fp				
Stand				

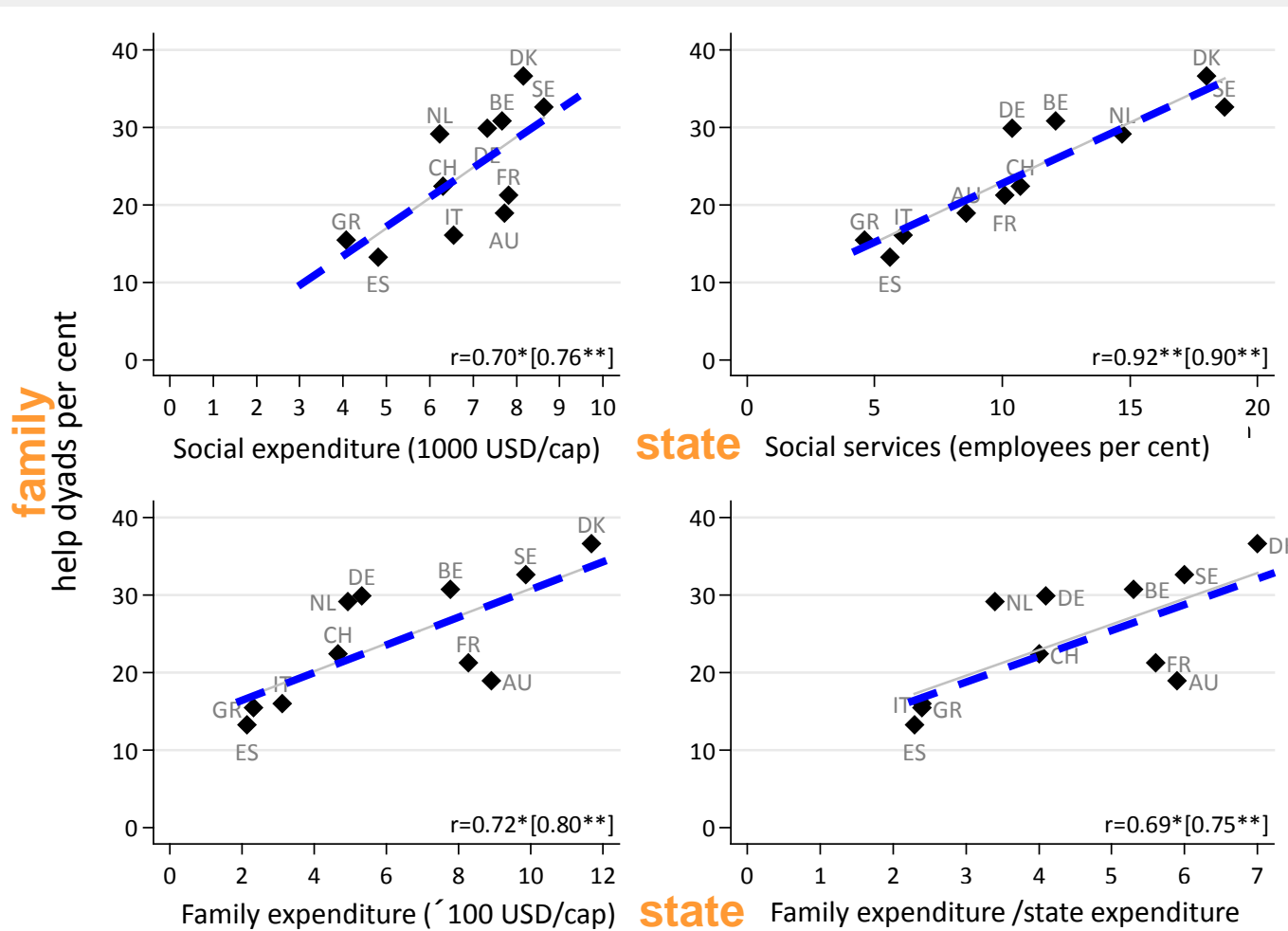


# Prejudice 3: War between generations



SHARE 2004,  $n=7.825/40.073$  dyads. Source: Brandt/Deindl 2013

# Help to parents and social policies



Source: Brandt/Deindl 2013

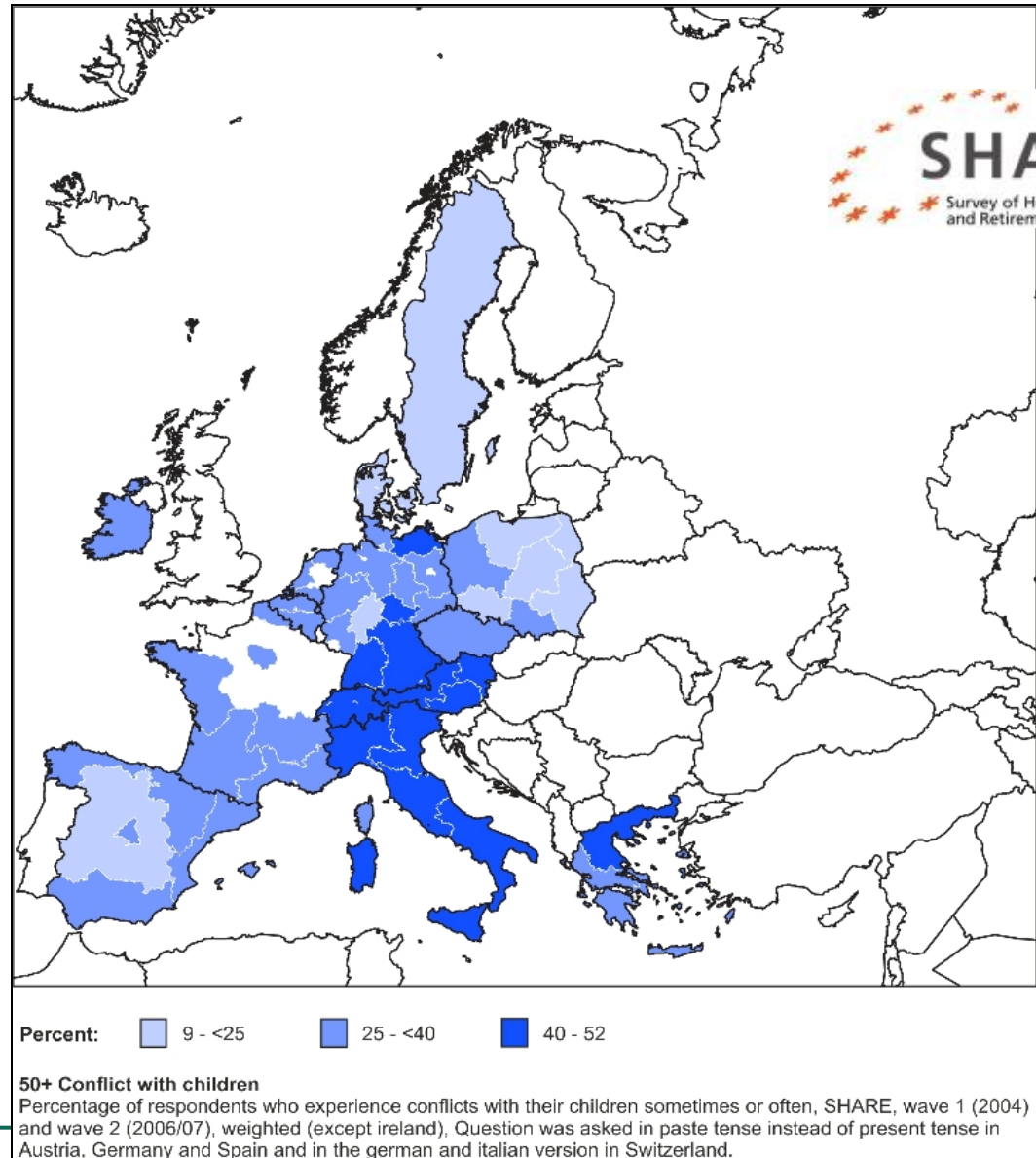
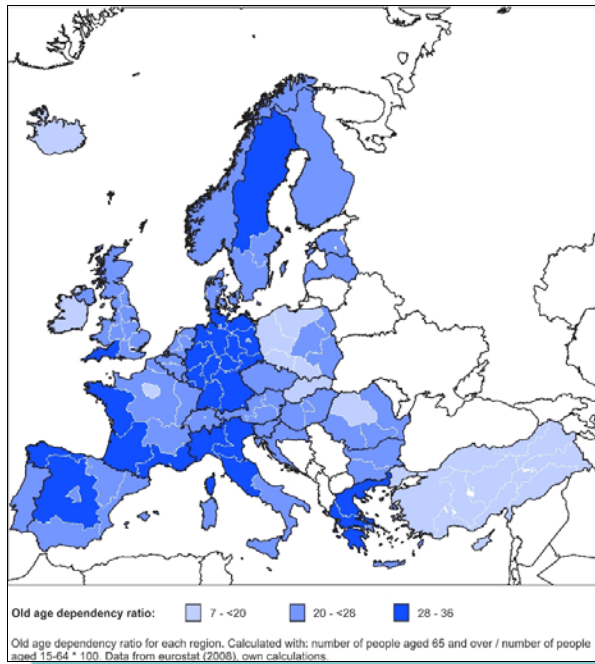


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# Conflict with children

## More in „old“ regions?

Figure 1: Old age dependency ratio in European regions  
Figure 1: Old age dependency ratio in European regions





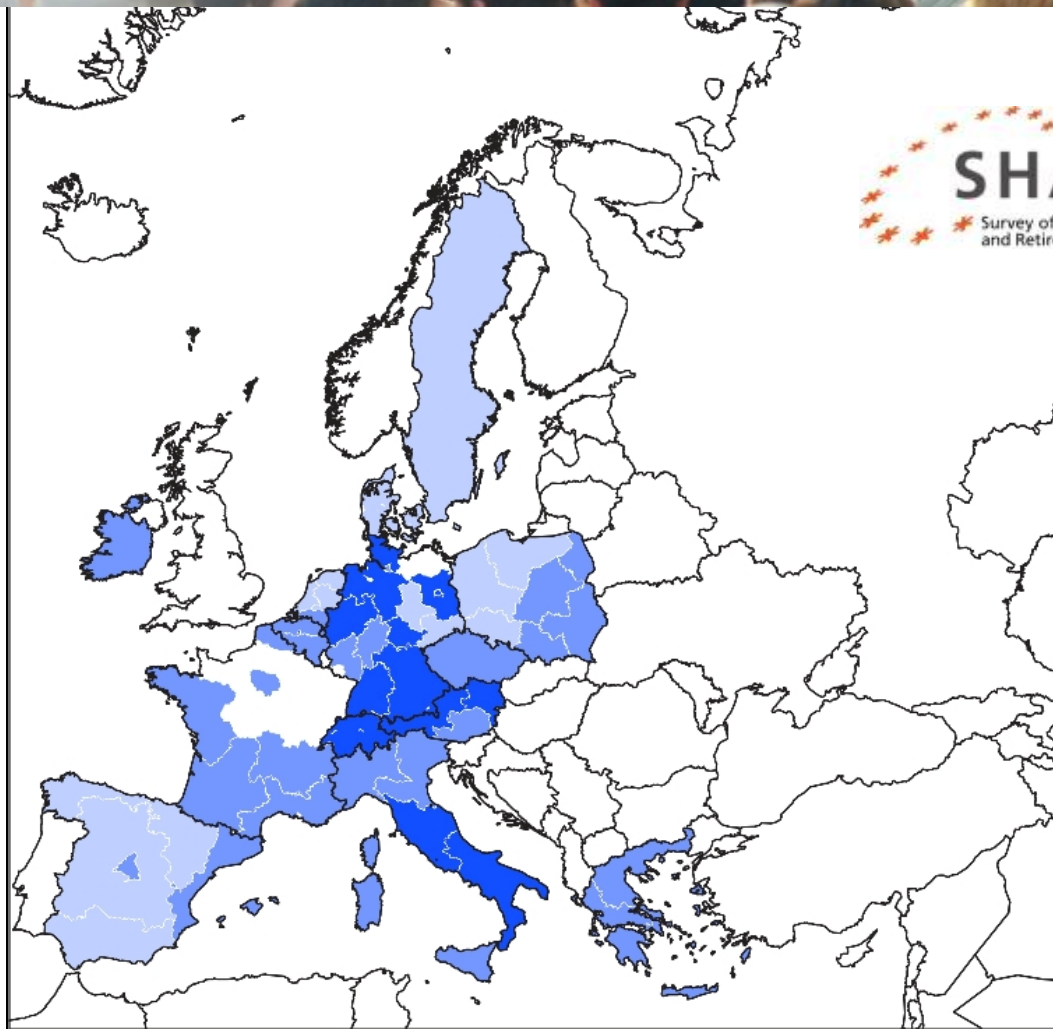
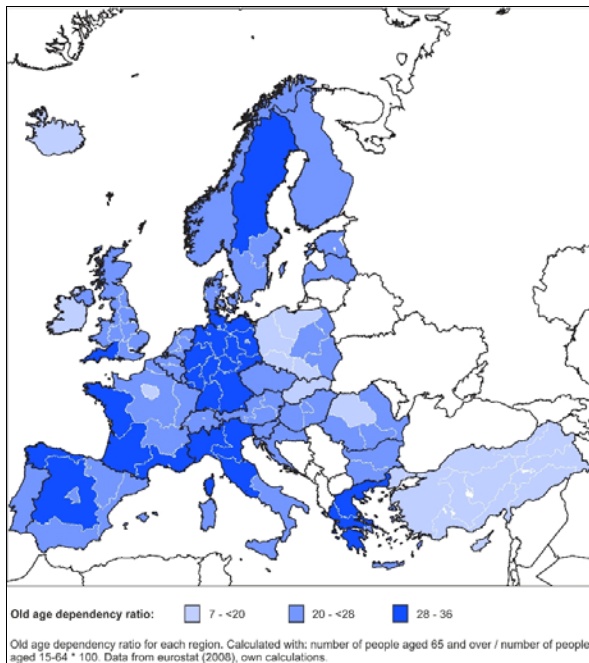
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# Conflict with parents

## More in „old“ regions?

Figure 1: Old age dependency ratio in European regions

Figure 1: Old age dependency ratio in European regions



Percent: 2 - <18 18 - <31 31 - 45

### 50+ Conflict with parents

Percentage of respondents who experience conflicts with their parents sometimes or often, SHARE, wave 1 (2004) and wave 2 (2006/07), weighted (except Ireland). Question was asked in past tense instead of present tense in Austria, Germany and Spain and in the German and Italian version in Switzerland.



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# More dimensions: regression analysis

## Family relations:

1. Financial transfer provided to children	reverse
2. Financial transfer received from children	yes
3. Conflict with children and grandchildren	reverse
4. Conflict with parents	reverse
5. Trust to children and grandchildren	reverse
6. Trust to family members over 70	reverse

## Non-family relations:

7. Having at least one friend who is younger than 30 (all respondents)	yes
8. Having at least one friend who is younger than 30 (older than 64)	yes
9. Having at least one friend who is older than 70 (all respondents)	reverse
10. Having at least one friend who is older than 70 (younger than 30)	reverse
11. Meeting socially at least once a week (all respondents)	yes
12. Meeting socially at least once a week (younger than 30)	yes
13. Meeting socially at least once a week (older than 64)	yes
14. Felt age discrimination (all respondents)	reverse
15. Felt age discrimination (younger than 30)	reverse
16. Felt age discrimination (older than 64)	yes

## Values and political preferences:

17. Higher taxes and spending more on social services? (all respondents)	reverse
18. Higher taxes and spending more on social services? (younger than 30)	reverse
19. Higher taxes and spending more on social services? (older than 64)	reverse
20. Family or state responsible for financial support for older persons	yes
21. Family or state responsible for help with household chores for older persons	reverse
22. Family or state responsible for personal care for older persons	reverse



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# Conclusions

**X-national and X-disciplinary panel data are an enormous help to better understand active aging**

***SHARE: Intra-European variation in policies, histories and habits helps to identify causal pathways and to refute prejudices:***

- ***Health*** is good at old age, ***healthcare*** a worthwhile investment
- ***Retirement***: not only bliss: watch out for negative side effects
- ***Societal cohesion***: upcoming intergenerational conflict a myth

