



**Survey of Health,
Ageing and
Retirement in
Europe**

12/2008

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Editorial

Dear readers,

on November 28, SHARE reached a further milestone with the official release of its Wave 2 data in Brussels. The well-attended event took place in the Representation of the State of Baden-Württemberg and was highly successful. After addresses by various EU representatives and an overall introduction to SHARE in the opening session, the afternoon was dedicated to presentations of latest findings based on Wave 2 data. Moreover, a book comprising some 40 studies with initial longitudinal analyses of health, ageing and retirement in Europe was presented. The book also shows the close comparability of SHARE with its sister studies, the English Longitudinal Study of Ageing (ELSA) and the U.S. Health and Retirement Study (HRS). The data as well as the book can now be downloaded from the SHARE website (www.share-project.org).

While the final preparations for the Wave 2 data release were still ongoing, the field phase of SHARE's Wave 3 started in early November. First interviews have been conducted in all countries and the field phase will continue until the end of April 2009. Parallel to conducting Wave 3, the coming year will be dedicated mainly to preparing for SHARE's Wave 4. While data collection in Wave 3 sets a special focus on the life histories of the respondents, Wave 4 will again resort to the 'conventional' longitudinal survey format executed in Waves 1 and 2.

To maintain and improve the high quality of SHARE, we recently installed a Scientific Monitoring Board, whose first meeting took place during a SHARE conference in Madrid this November. The Board is chaired by Dutch economist Arie Kapteyn and its members include renowned international scientists from various disciplines, such as Nobel laureate Daniel McFadden.

The SHARE team is looking forward to another eventful year and wishes all readers restful Christmas holidays and a successful start into 2009.

Sincerely,
Prof. Axel Börsch-Supan, Ph.D.
Mannheim, December 2008

SHARE on stage in research and policy

SHARE at the European Conference on Research Infrastructures, Versailles, December 9-10, 2008

The 5th Conference on Infrastructures focused on the impact of Research Infrastructures, on economic challenges in conjunction with the Lisbon objectives, on problems of society, such as environmental concerns or expertise, on training in human resources and attracting high level scientists. Prof. Axel Börsch-Supan, co-ordinator of SHARE, spoke about the importance of research infrastructures in the field of research on population ageing. Further on, interested attendants were able to learn more about SHARE in the hall of exhibitions where a poster describing the project was displayed.

Public release of the SHARE Wave 2 data and Workshop on First Results, Brussels, November 28, 2008

The public release of the SHARE Wave 2 data and the presentation of SHARE's second "First Results Book" on the SHARE wave 2 data was celebrated on November 28th in Brussels. After presentations and speeches by supporters, the afternoon was mainly dedicated to the latest findings based on the Wave 2 data. For more information see the newsletter section "SPECIAL: SHARE Data Release in Brussels".

COMPARE final policy conference: Toolbox for Improving the Comparability of Cross-National Survey Data with Applications to SHARE, Brussels, September 22, 2008

COMPARE aimed to improve internationally comparable measures of well-being: health, work, disability, job satisfaction, etc. It exploited anchoring vignettes to increase the comparability of subjective measures across cultures with different response styles. COMPARE data was collected in ten European countries. On the final conference COMPARE researchers presented the first results based upon that data, which give insight in many aspects of well-being of the elderly across Europe.

SHARE Polish First Results Conference, Warsaw, September 17, 2008

An overall media introduction to the SHARE project by the Polish country team leader Michal Myck was followed by presentations on physical health, life style and health. Other topics were the people 50+ on the labour market, wellbeing and social capital, retirement, transfers and financial situation. The conference was attended by representatives from the Ministries of Labour and Science.

SHARE Symposium at the First ISA Forum of Sociology "Sociological Research and Public Debate", RC 11 'Sociology of Ageing', Barcelona, September 5-8, 2008

The main aim of the symposium was to inform a broader public about the power of SHARE for both scientific research and policy makers. After an overall presentation of the SHARE project and its concerns, presentations focused on two major topics particularly relevant for sociologists and social gerontologists: intergenerational support and quality of life.

SPECIAL: SHARE Data Release in Brussels

On November 28, SHARE officially launched the data of Wave 2, collected in 2006/2007. After the first wave of data collection in 2004/2005, the second wave constitutes an important step towards building a longitudinal data infrastructure on ageing, which will amplify the possibilities for data analysis and research. First findings based on that longitudinal data are represented in *Health, Ageing and Retirement in Europe (2004-2007). Starting the Longitudinal Dimension*. This book comprises more than 40 papers, and presents substantive results from an economic, sociological and public health point of view. Both, the data release and the book, are available via the SHARE website (www.share-project.org).

The data launch and the accompanying presentation of the book were celebrated in Brussels at the Representation of the State of Baden-Württemberg – the German home state of the Mannheim Research Institute for the Economics of Aging (mea), where SHARE is centrally coordinated. Attendants were welcomed by Klaus Tappeser, Ministerialdirektor at the Ministry of Science, Research and Culture of the State of Baden-Württemberg.

The Importance of Data and SHARE

Robert-Jan Smits, Director at the European Commission's DG Research, delivered a keynote address on behalf of Commissioner Janez Potočnik. In his speech, Smits stressed that preparing for an ageing society is now a vital part of the European policy agenda. Reliable and accessible data are of great importance for the design of good social and economic policies. By supporting the Survey of Health, Ageing and Retirement in Europe, the European Commission has started to build a systematic European data infrastructure for cross-national research into the implications of an ageing population. Smits said that developing world class Research Infrastructures is one of the five major priorities of the Commission's renewed strategy for the European Research Area. European data collection and database development are both time consuming and costly exercises, which require a significant coordination effort at the national and European level. According to Smits, EU Research Framework Programme funding cannot continue supporting almost all the costs of such a huge European-scale panel survey. Thus, by formalising SHARE as a Research Infrastructure, it can be put on a more permanent footing. Existing as an infrastructure will make it easier for funding to come from a wider variety of sources. Longer term planning will be possible and proper legal and financial frameworks can be created. Smits concluded that the development of the ESFRI Roadmap has already helped to add a better and long-term perspective to the development of European social science data, which will help policy makers to improve their policies.

The keynote address was followed by a multimedia introduction into SHARE and a talk by professor Axel Börsch-Supan, coordinator of SHARE, who presented some first longitudinal findings of SHARE. The opening session ended with a questions and answers part.

Work and Retirement in Europe

The afternoon was dedicated to the latest findings based on Wave 2 data. Jérôme Vignon, director of DG Employment, gave the introducing speech to the 'Work and Retirement' part. Professor Axel Börsch-Supan then talked about the role of institutions in European patterns of work and retirement. He stated that the variation in retirement behaviour, old age labour force participation and disability insurance take-up rates across European countries is striking. Pathways to retirement are different, but their effect on labour force participation is evident in all countries. According to Börsch-Supan, health is an important determinant of earlier retirement, but it does not explain the large cross-national variation. The latter is rather explained by institutional differences in welfare systems, which clearly affect the distribution and the age pattern of participation to the labour market and of retirement. Countries where early retirement is allowed and/or is generous see a prevalence of early retirees (typically Southern countries, but also Austria and France). Furthermore, in countries where other exit routes are allowed as form of early retirement (disability and unemployment) these substitute for retirement. In general, the current retirement institutions provide

generous early retirement options, partially through lenient disability and unemployment insurance rules, causing a potentially huge unused labour capacity. The social policy implications are clear, says Börsch-Supan: If Europeans want to reduce the already high tax and contribution burdens in the light of population ageing, they should exploit this unused capacity of individuals who self-report to enjoy a good functional health status.

Another presentation concerned with work and retirement was given by Johannes Siegrist, Professor of Medical Sociology and director of the respective department at the University of Düsseldorf. Siegrist gave insight into the topic was social productivity and quality of life in early old age (for details see the interview in the newsletter section 'Research in progress').

Health in Europe

Andrzej Rys, Director of the Unit Public Health at the European Commission's DG SANCO (Directorate General Health and Consumer Protection), introduced the 'Health' part of the afternoon. He talked about ageing in Europe and about the EU's ways to face the ensuing challenges. At the beginning of his presentation, he stressed the EU's awareness of the fact that the "number of elderly people in the EU will increase significantly after 2010 and until around 2030 (+ 37.4%)." Rys further on mentioned that Europe is the only continent whose population growth rate for the next years is negative (-0.28%). First steps by the European Union to counter the thus arising problems were already taken at the Lisbon Council in the year 2000. At that time EU leaders had manifested the need to monitor the development of societal ageing in a globalized world. Although, according to Rys, the term "elderly" nowadays does not signify retirement, bad health and uselessness for society, certain challenges will have to be handled in the next decades.

The final presentation that day was given by Karen Andersen-Ranberg, MD, Ph.D., from the University of Southern Denmark. The specialist in geriatric medicine presented her latest findings in the field of dynamics of health and health care use among the European Oldest Old (i.e. persons aged 80 and over). For more details related to the topic please consult the newsletter section 'Research in progress'.

SHARE especially wants to thank the Representation of the State of Baden-Württemberg for hosting the event. Further thanks go to all the speakers and to the supporters of SHARE, namely the European Commission's DG Research, DG Employment, Social Affairs, and Equal Opportunities, DG Economic and Financial Affairs, DG Health and Consumer Protection.

Pictures from the SHARE Wave 2 data release

Professor Axel Börsch-Supan, coordinator of SHARE



Professor Axel Börsch-Supan, coordinator of SHARE, with Robert-Jan Smits, Director of DG Research



Andrzej Rys, DG Sanco



SHARE research in progress

First Results from Wave 2

Karen Andersen-Ranberg, Ph.D., University of Southern Denmark, on "The Dynamics of Health and Health Care Use among the Oldest Old"

- *Why is it important to do research on the Oldest Old?*

The Oldest Old (i.e. persons aged 80 and over) are the fastest growing age segment in Europe due to a substantial decline in mortality among this age group. Moreover, at the individual level, advancing age is followed by an increasing risk of being in bad health and experience bereavement. At the societal level an increasing proportion of oldest old is predicted to have major impact on national health care costs, e.g. use of GPs, geriatricians, allied health care professionals, home care, institutions, hospitals etc., Recent studies suggest that the prevalence of disability is declining, while the prevalence of diseases (morbidity) is increasing. Consequently, the European society has an interest in knowing whether this increase in life-expectancy can be balanced by improving health and reducing health care requirements.

- *How can health be measured?*

Health may be measured in many ways. It is important to know this. For most people being in good health is synonymous with having no limitations in daily functions, while health professionals see it as a state without disease and no use of medication. Policymakers may interpret good health as a situation where the older individual can live independently. In SHARE we use various indicators of bad health: limitations in activities of daily living, the use of 5 or more different medications per day, consulting a health professional more than 6 times a year, and need for home care. Using the SHARE data, we focus on cross-sectional differences in various indicators of bad health in Waves 1 and 2, and on longitudinal changes between the two waves.

- *Working with SHARE Wave 2 data, which cross-sectional findings were you able to make?*

The cross-sectional results from 2004 and 2006 are mainly related to geographical regions. In 2004, the Oldest Old in the continental countries had the highest prevalence in having five or more visits to a medical doctor within one year. The Northern countries had a significantly lower prevalence. This pattern was unchanged in 2006. The same pattern can be found in cognitive impairment. In contrast, receiving home care is much more prevalent among Northern and continental Oldest Old in both waves, but this may be explained by the fact that home care is much less prevalent in Southern countries.

With regard to the new SHARE countries (Israel, Poland and the Czech Republic), we also made some interesting observations. The Israeli Oldest Old show a high prevalence in all the health indicators, which surpasses all the old SHARE countries. The only exception can be found in impairment in activities of daily living. Here it is the Polish Oldest Old that have the highest prevalence. In general, the Czech Oldest Old's prevalence in all health indicators is almost similar to the one of the Southern countries. Only when it comes to impairment in activities of daily living, the Czechs show the same low prevalence as the Northern countries.

- *What can you tell us with regard to longitudinal findings?*

Among the Oldest Old there is a general pattern of deteriorating health over a period of only two years, although the risk of deterioration varies between the three geographical regions. The Northern countries

have a low prevalence of impairment in activities of daily living in relation to the Continental and Southern countries, but the longitudinal data show that they have the highest risk of being impaired in activities of daily living two years later. The same pattern can be found regarding low cognition. In contrast, the Oldest Old in the Southern countries had the highest risk of receiving four or more different types of medication. Still, over two years there was no increase in the risk of receiving home care. This might be explained by less availability of this service.

The full text of the discussed paper by Andersen-Ranberg and her co-authors is available on the SHARE website: Andersen-Ranberg, K., J.M. Robine, M. Thinggaard, K. Christensen. What has happened to the Oldest Old SHARE Participants After Two Years?, in: Börsch-Supan, A. et al. Health, Ageing and Retirement in Europe (2004-2007). Starting the Longitudinal Dimension, Mannheim: MEA, 2008, 66-73.

Prof. Johannes Siegrist, University of Düsseldorf, on "Social Productivity and Quality of Life in Early Old Age"

- *How do social productivity and quality of life correspond to each other?*

There is growing recognition of the fact that a large proportion of healthy, skilled and motivated people in early old age lack opportunities to contribute to the society at large, either by continuing formal work beyond fixed retirement age or by becoming engaged in informal work (e.g. voluntary work). Being socially productive in formal or informal work has beneficial effects on well-being and quality of life and may contribute to healthy ageing. SHARE data provide a unique opportunity to study determinants and consequences of social productivity in early old age.

- *Which findings based on the SHARE data were you able to make?*

The proportion of employed or self-employed people aged 50+ who intend to retire as early as possible is higher in all countries if low control at work is experienced. The same holds true for the experience of high effort in combination with low reward. Both conditions predict reduced well-being (e.g. a higher proportion of depressive symptoms). The proportion of respondents who exhibit depressive symptoms in Wave 2 is remarkably higher than in Wave 1. Further on, older people who were engaged in voluntary work in Wave 1, experience higher quality of life in Wave 2. This is most clearly the case if their engagement is reciprocated by some type of reward (mostly in terms of esteem or social recognition).

In conclusion, the socio-emotional and motivational consequences of participating in rewarding and control-enhancing formal and informal productive activities for improved quality of life in early old age are considerable.

- *Which policy messages can be drawn from these findings?*

Findings from SHARE support two policy messages. First, by investing into improved quality of work, the proportion of employed people with early exit from the labour market can be reduced. In addition, beneficial effects on health and well-being can be achieved. Second, by further developing opportunities of informal work among retired people, individual benefit in terms of quality of life and collective benefit in terms of improved social capital is expected.

The full text of the discussed paper by Siegrist and his co-authors is available on the SHARE website: Wahrendorf, M., O. von dem Knesebeck, J. Siegrist. Social Productivity and Quality of Life - First Prospective Findings, in: Börsch-Supan, A. et al. Health, Ageing and Retirement in Europe (2004-2007). Starting the Longitudinal Dimension, Mannheim: MEA, 2008, 188-94.

SHARE data updates and alerts

Data from Wave 2 is now available

The data from the 2006/07 longitudinal and refresher study are now available for scientific use, free of charge. Registered SHARE users can access the data with their current login code and password. New users have to register only once. The login code and password stay valid for all subsequent releases and future waves of the data. You can download the data from the CentERdata website. Some of the most important updates and changes are listed below. For a detailed description please consult the SHARE website:

www.share-project.org

Modules

Wave 2 is structured similarly to Wave 1. The data consist of different modules, which can be used separately or combined into a large file. There are three new modules in Wave 2, two of them concerning the measurement of health. The third one is available only for the longitudinal samples, and contains the end-of-life interviews, i.e. information on the deaths of former respondents.

Sample

There are two different respondent types in Wave 2: respondents already interviewed in Wave 1 and respondents who had their first interview in Wave 2. In all countries except Austria and the Flemish part of Belgium, a refresher sample was drawn with the same sampling methods as in Wave 1. Only cohorts born in 1955 and 1956 were oversampled to keep the sample representative of the population 50 years old and older. Variables to identify which sample each individual belongs to are included in the data.

Countries

The original countries from Wave 1 also participated in Wave 2. This creates longitudinal data in Austria (AT), Belgium (BE), Switzerland (CH), Germany (DE), Denmark (DK), Spain (ES), France (FR), Greece (GR), Italy (IT), The Netherlands (NL), and Sweden (SE). In addition, two new countries have been added: the Czech Republic (CZ) and Poland (PL).

Ireland (IE) conducted a SHARE study in 2008, which will be released in early 2009. There is no second wave of SHARE in Israel (IL) so far.

Item Correspondence

For release 1.0.1 a new online tool is available for item correspondence within each wave. The tool gives an overview of the questions whose translation deviates from the generic version. Deviations for Wave 1 and 2 are documented. An online version of the item correspondence across waves will be provided in early 2009.

Presentation of SHARE Users

The number of users of SHARE data is constantly growing. The recent release of Wave 2 data offers a good opportunity to portrait two of them. Paweł Ulman is the 1,000th user of SHARE data. Kristina Potocnik was the first one to register after the release of Wave 2 data.

Paweł Ulman

received his Ph.D. in economics in 2000. Currently he is working at the Department of Statistics (Unit

Social Statistics) at Cracow University of Economics. His scientific interests are the distribution of household incomes and expenses, modeling of income distribution, inequality of income, costs of living, well-being and welfare comparisons, equivalence scales, economic activity of people, and the economic situation of disabled persons in Poland and the EU. Ulman is preparing his postdoctoral thesis about the economic situation of disabled persons and their households in Poland and the EU. SHARE data allow him to develop his research in this area.



Kristina Potocnik

graduated in psychology at the Department of Psychology at the University of Ljubljana (Slovenia) in 2004. Currently, she is working as a Research Assistant at the Social Psychology Department at the University of Valencia (Spain). She is finishing her Ph.D. dissertation on “Prospective and retrospective analysis of retirement process: antecedents and consequences”. Her current research interests cover individual and social context antecedents of retirement process and adjustment to retirement in terms of satisfaction with retirement and psychological well-being. However, more broadly, she has also studied antecedents of employees’ health and well-being in health care teams and social services. SHARE data will help her to examine part of her hypothesis on a large European sample.



Selection of latest SHARE based publications

Bago d’Uva, T., O. O’Donnell, and E. van Doorslaer. (2008). Differential health reporting by education level and its impact on the measurement of health inequalities among older Europeans. *International Journal of Epidemiology* August 2: 1-9.

Börsch-Supan, A., A. Brugiavini, H. Jürges, A. Kapteyn, J. Mackenbach, J. Siegrist, and G. Weber (eds.). (2008). *Health, Ageing and Retirement in Europe (2004-2007) – Starting the longitudinal dimension*,

Mannheim: MEA.

Börsch-Supan, A., K. Hank, H. Jürges, and M. Schröder. (2009). Longitudinal Data Collection in Continental Europe: Experiences from the Survey of Health, Ageing and Retirement in Europe. In: J. Harkness et al. (Eds.). *Survey Methods in Multinational, Multiregional and Multicultural Contexts*. Hoboken, NJ: John Wiley & Sons, forthcoming.

Bolin, K., B. Lindgren, and P. Lundborg P. (2008). Your next of kin or your own career? Caring and working among the 50+ of Europe. *Journal of Health Economics* 27 (3), 718-738.

Bonsang, E. Does Informal Care From Children to their Elderly Parents Substitute for Formal Care in Europe?. *CREPP Working Papers* (2008/1).

Buber, I. and H. Engelhardt. (2008). Children's impact on the mental health of their older mothers and fathers: findings from the Survey of Health, Ageing and Retirement. *European Journal of Ageing* 5 (1), 31-45.

Castro-Costa, E., M. Dewey, R. Stewart, S. Banerjee, F. Huppert, C. Mendoca-Lima, C. Bula, F. Reisches, et al. (2008). Ascertaining late-life depressive symptoms in Europe: An evaluation of the EURO-D Scale in 10 nations. The SHARE project. *International Journal of Methods in Psychiatric Research* 17: 12-29.

Chatterji, S., P. Kowal, C. Mathers, N. Naidoo, E. Verdes, J.P. Smith, and R. Suzman. (2008). The Health of Aging Populations in China and India. *Disease and Demography* July/August 2008: 1052-63.

Delavande, A. and S. Rohwedder. (2008). Differential Mortality in Europe and the U.S.: Estimates Based on Subjective Probabilities of Survival. *RAND Working Paper* WR-613.

Endweld, M. and R. Cohen. (2008). The Economic Standard of Living of the Adult Population. *Social Security - Journal of Welfare and Social Security Studies* 76: 97-124.

Espelt, A., C. Borrell, M. Rodriguez-Sanz, C. Muntaner, M.I. Pasarin, J. Benach, M. Schaap, A. Kunst, and V. Navarro. (2008). Inequalities in health by social class dimensions in European countries of different political traditions. *International Journal of Epidemiology* 37 (5), 1095-1105.

Hank, K. and S. Stuck. (2008). Volunteer Work, Informal Help, and Care Among the 50+ in Europe: Further Evidence for 'Linked' Productive Activities at Older Ages. *Social Science Research* 37 (4), 1280-1291.

Kalmijn, M., and C. Saraceno. (2008): A comparative perspective on intergenerational support – Responsiveness to parental needs in individualistic and familialistic countries. *European Societies* 10 (3), 479-508.

Kalwij, A. and F. Vermeulen. (2008). Health and labour force participation of older people in Europe: What do objective health indicators add to the analysis? *Health Economics* 17 (5), 619-638.

Litwin, H. (2008). Private Intergenerational Transfers Among Persons Aged 50+: The Exchange of Time, Money and Shared Housing. *Social Security - Journal of Welfare and Social Security Studies* 76: 247-68.

Olivera, J. (2008). Motives for parental money transfers in Europe. *Center of Economic Studies Discussion Papers* 0826. Catholic University of Leuven.

Peytremann-Bridevaux, I. and B. Santos-Eggimann. (2008): Healthcare and preventive services utilization of elderly Europeans with depressive symptoms. *Journal of Affective Disorders* 105 (1-3), 247-252.

Rueda, S. and L. Artazcoz. (2008). Health Inequalities Among the Elderly in Western Europe. *Journal of Epidemiology and Community Health* 62(6): 492-98.

Find the complete list of SHARE based publications on our website: www.share-project.org

Please help us to keep this list up-to-date by informing us about all your SHARE based publications. Moreover, remember to include the user acknowledgement in all of them. The text of the acknowledgement can be found in the section "Access the data" of the SHARE website.

Contact

Contact

Tatjana Schäffner
Mannheim Research Institute for the Economics of Aging
Building L 13/17, D-68131 Mannheim
Phone: +49 621 181 3220
Fax: +49 621 181 1863
Mail: schaeffner@mea.uni-mannheim.de

Imprint

Mannheim Research Institute for the Economics of Aging (MEA)
University of Mannheim
Building L 13, 17
D-68131 Mannheim

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