

AGEING SOCIETIES: DATA NEEDED FOR RESEARCH AND POLICY

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OECD study on cross-national differences
of ageing-related diseases
Concluding workshop – Paris, 20-21 June 2002
Session 3: AGEING

Research questions for public policy in ageing societies

- Link health status – socio-economic status
- Dependency risk
- Retirement decisions
- Savings and consumption behaviours
- Changes in health care coverage

Data requirements

- Comparable across countries
- Household/individual level
- Repeated observations
- Multidisciplinarity

SHARE

**SURVEY OF HEALTH, AGEING AND
RETIREMENT IN EUROPE**

SHARE Project - Tasks

- Interdisciplinary team
- Iterative development of common questionnaires in 9 participating countries
- Sample design development
- Conduct of experiments and pilots
- Conduct of medium scale cross-national survey
- Data analysis and dissemination
- Recommendation for a full scale pan-European longitudinal SHARE

SHARE Project

Core management group

Axel Börsch-Supan, Project coordinator
Prof. of economics, University of Mannheim -
Germany

Agar Brugiavini
University of Venice - Italy

Arie Kapteyn
Tilburg University and RAND - USA

SHARE Project - Partners in consortium and Country team (leaders)

- Germany (Axel Börsch-Supan, *SHARE Coordinator*)
- Denmark (Martin Browning)
- France (Thierry Magnac)
- Greece (Platon Tinios)
- Italy (Guglielmo Weber)
- Netherlands (Arthur van Soest)
- Spain (Manuel Arellano)
- Sweden (Anders Klevmarcken)
- Switzerland (Alberto Holly)

SHARE Project

Responsibility of Country team leaders

- Implementation of SHARE in each country
- Accountability for finances (incl. co-financing from national sources, subcontracting) and legal requirements
- Legal responsibility for one or more workpackages

SHARE Project – Working group (leaders)

- Physical health (Johan Mackenbach)
- Mental health and psychological status (Martin Prince)
- Well-being and psychosocial environment (Johannes Siegrist)
- Saving and assets (Tullio Jappelli)
- Income and poverty (Martin Browning)
- Consumption (Martin Browning)
- Labour force participation, earnings and pension claims (Agar Brugiavini)

SHARE Project – Working group (leaders)

- Expectations and subjective probabilities (Luigi Guiso)
- Family and social networks (Martin Kohli)
- Intergenerational transfers (Claudine Attias-Donfut)
- Health system and health services utilization (Brigitte Santos-Eggimann)

Survey methodology:

- Cross-national survey design (Anders Klevmarcken)
- Data validation (Arthur van Soest)
- Response analysis (Franco Peracchi)

SHARE Project

Responsibility of working groups

- Responsibility for scientific aspects of the survey
- Conduct substantive work on questionnaire contents, survey methods and data collection

SHARE Project

Responsibility of Core management group

- Set constraints within which country teams and working groups operate
- Set final contracts and evaluation criteria for field work
- Monitor working progress of country teams and working groups
- Organize plenary meetings

SHARE Project- Experiments and tests

- Small-scale experiments (n=20-50)
- Full-questionnaire pilot (n=100/country)
- Medium scale survey (n=1500 households/country)

SHARE and Ageing-Related Diseases

Specific modules:

- Physical health
- Mental health and psychological status
- Health system and services utilization

Effects of ageing on health systems

- ↗ needs for ambulatory and hospital care
- ↗ needs for primary prevention of chronic diseases (all ages)
- Specific needs for secondary and tertiary prevention, rehabilitation, palliative care
- ↗ needs for long term care
- ↗ ↗ costs

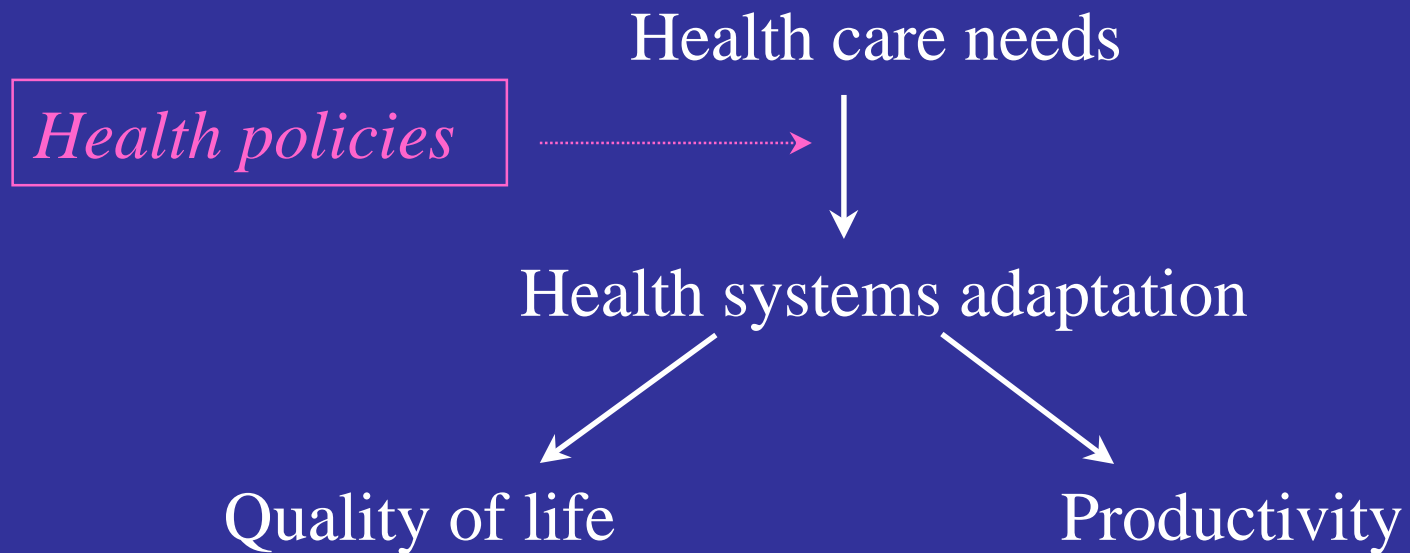
Effects of ageing on health systems

Economic constrains:

- *Priority setting (age-based rationing)*
- *Limitation of access to specialists care*
- *Managed care*
- ...

🕒 Health and economic final effects ?

SHARE and Ageing-Related Diseases



SHARE and Ageing-Related Diseases

- Compare the effects of national health policies
- Distinguish between the effects of individual and health system characteristics
(multilevel analysis)
- Examine causal sequence
health systems → access to care → health → wealth
- Integrate multiple determinants of health and wealth