



ERA-AGE: The Future of Ageing Research

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Research Infrastructures for Ageing

Axel Börsch-Supan

Director of MEA, Coordinator of SHARE





Europe as Laboratory

Future of Ageing Research

- **Science approach:** Formulate falsifiable hypotheses, collect suitable data, exploit experiments, use mathematical models to formulate mechanisms
- **Principle 1 = Breadth:** Understand the **interactions** between health, economic status, and social/family networks. Plus institutional and cultural environment
- **Principle 2 = Laboratory:** Use **European variation** in policies, histories, cultures to understand causes and effects of welfare state interventions
- **Thus:** Need **longitudinal interdisciplinary** data to understand the **ageing process** in Europe on the individual and the societal level

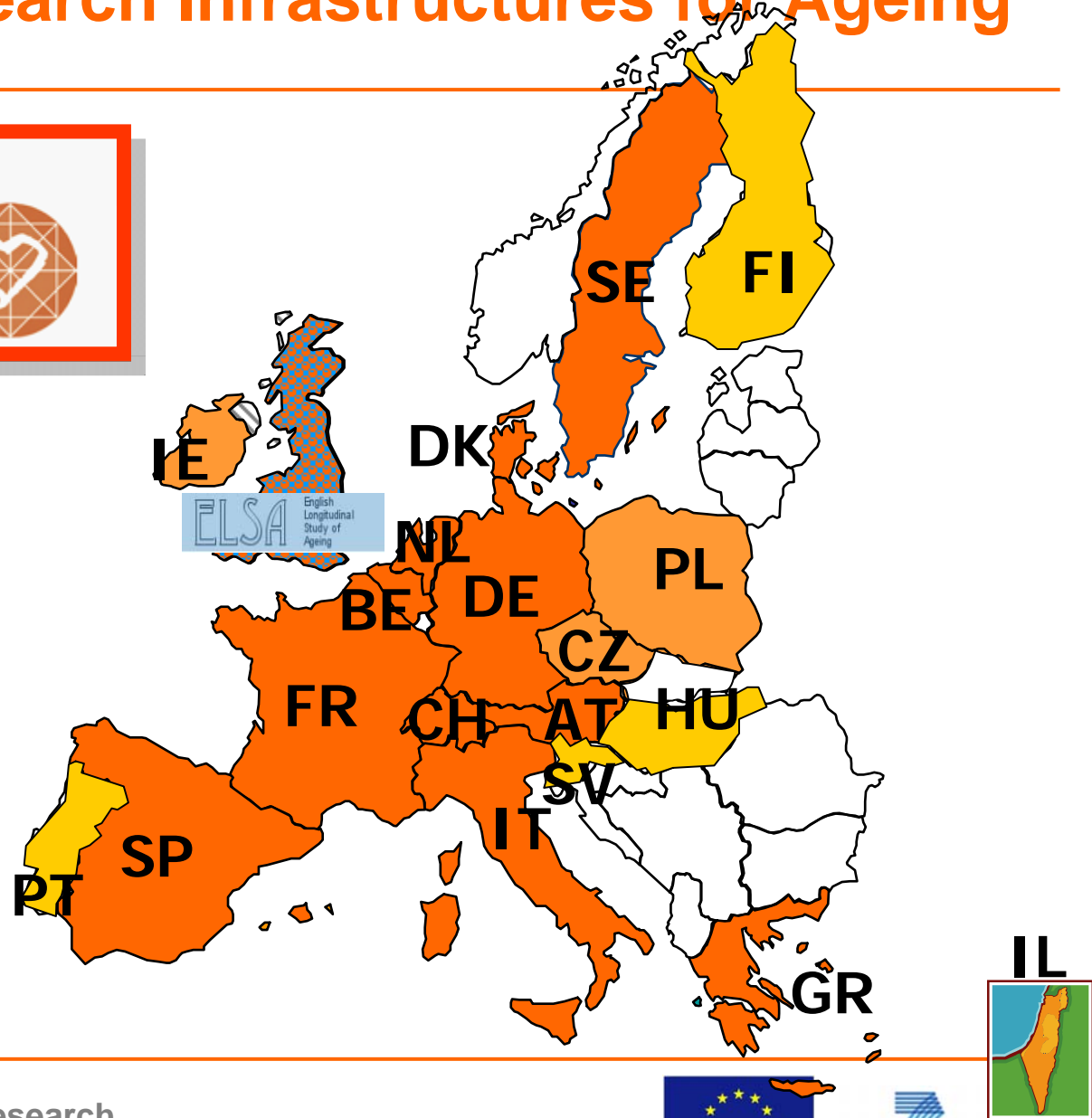
Research Infrastructures for Ageing



Wave 1: 2004/05
11 countries,
32,000 resp. 50+

Wave 2: 2006/07
15 countries,
38,000 responds.

Wave 3: 2008/09
19 countries,
43,000 est. responds.



▶ **Crossnational:**

- ▶ Exploit the variety of European cultures and policy approaches
- ▶ Ex ante harmonization across languages and cultures to distinguish true differences from measurement differences
- ▶ Laboratory approach

▶ **Multidisciplinary:**

- ▶ Get the full picture: health, economics & social/family environm.
- ▶ Understand interactions (e.g. health → economic conditions; work conditions and social/family environm. → health outcomes)

▶ **Longitudinal:**

- ▶ Need time dimension because ageing is a process not a state
- ▶ Reactions to ongoing reform processes



Interdisciplinary breadth

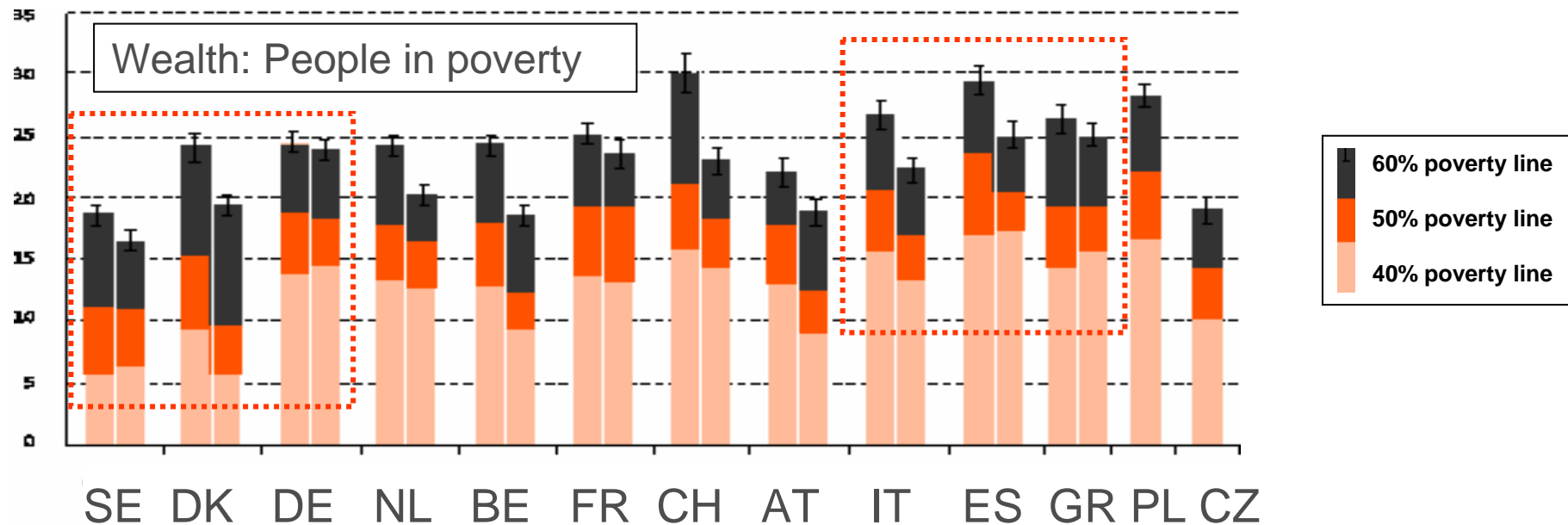
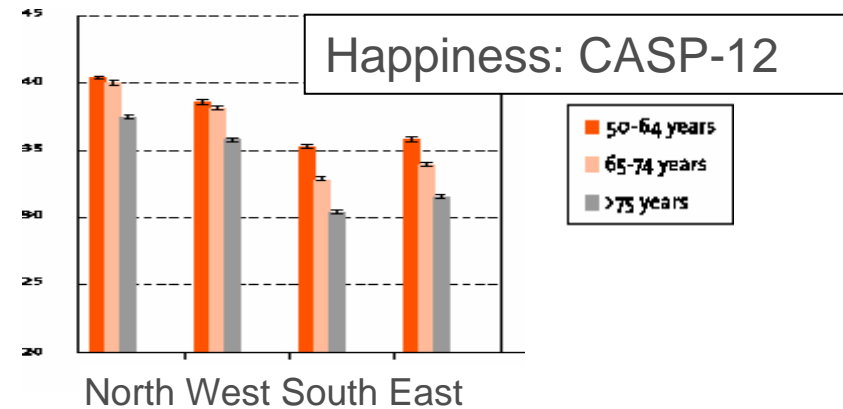
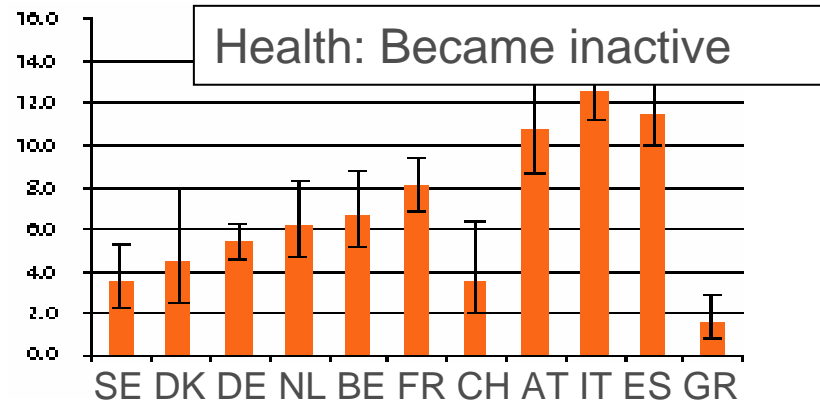
- **1. Health variables:** Self-reported health, self-reported conditions, physical functioning (ADLs, IADLs, walking speed/*chair stand*, grip strength, *peak flow*, *dry blood spots*), mental health and cognition, health behaviors and health service utilization, insurance coverage; *vignettes*.
- **2. Economic variables:** Current work activity and job characteristics (job demands, flexibility, hours worked, opportunities to work post-retirement age), employment history, pension rights, sources and composition of current income, wealth and consumption.



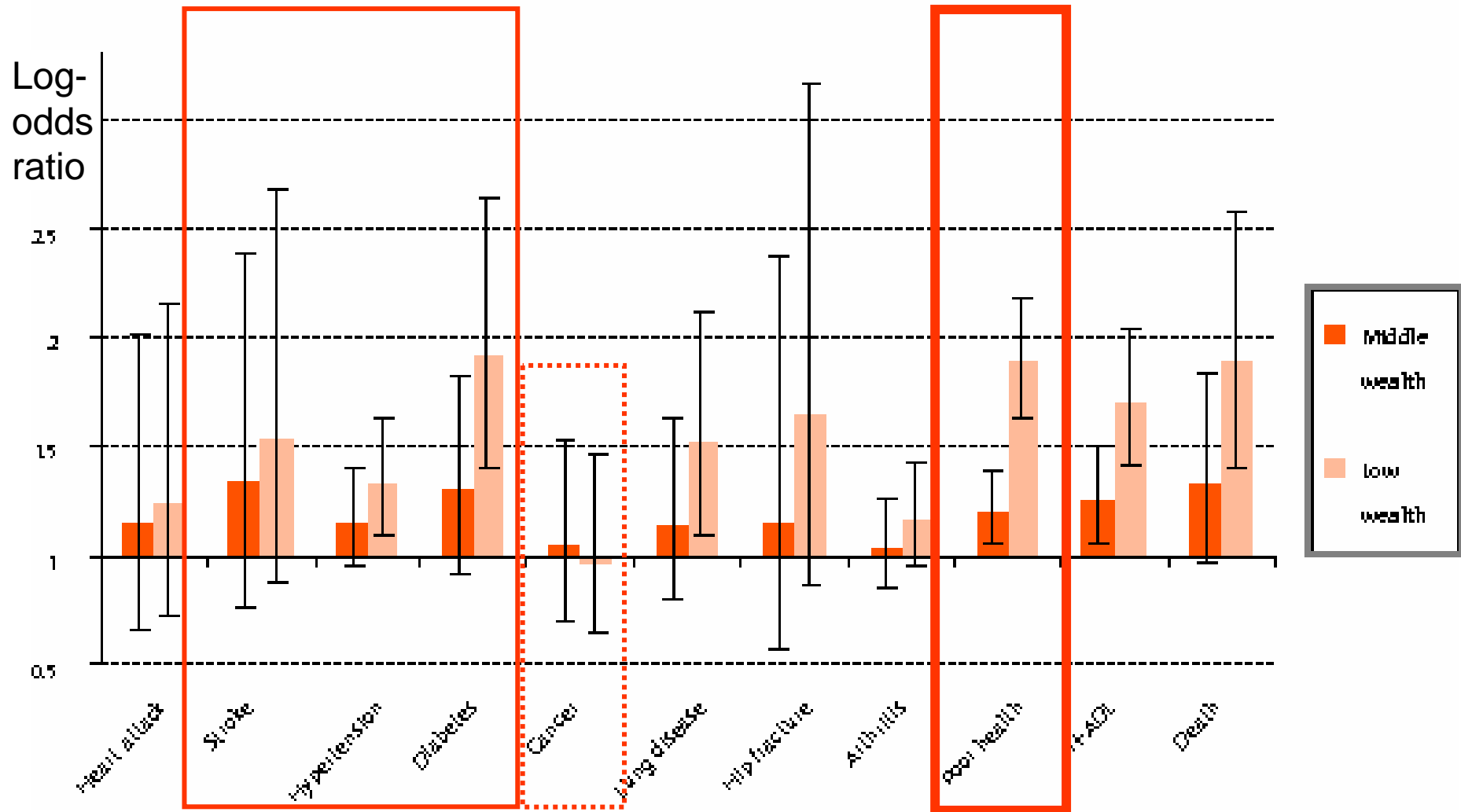
Interdisciplinary breadth

- **3. Family and Social Network:** Family structure, assistance within families, intergenerational transfers of assets, money and time, social networks, proximity to relatives and activities (shopping, amusement), time use after retirement, volunteer activities.
- **4. Psychological data:** Expectations, preferences, risk aversion, time horizon
- **5. Demographic data:** Basics (age, gender, marital status...), housing, education, links to administrative data

Northern Europeans are healthier, happier and wealthier but Southern Europeans live longer

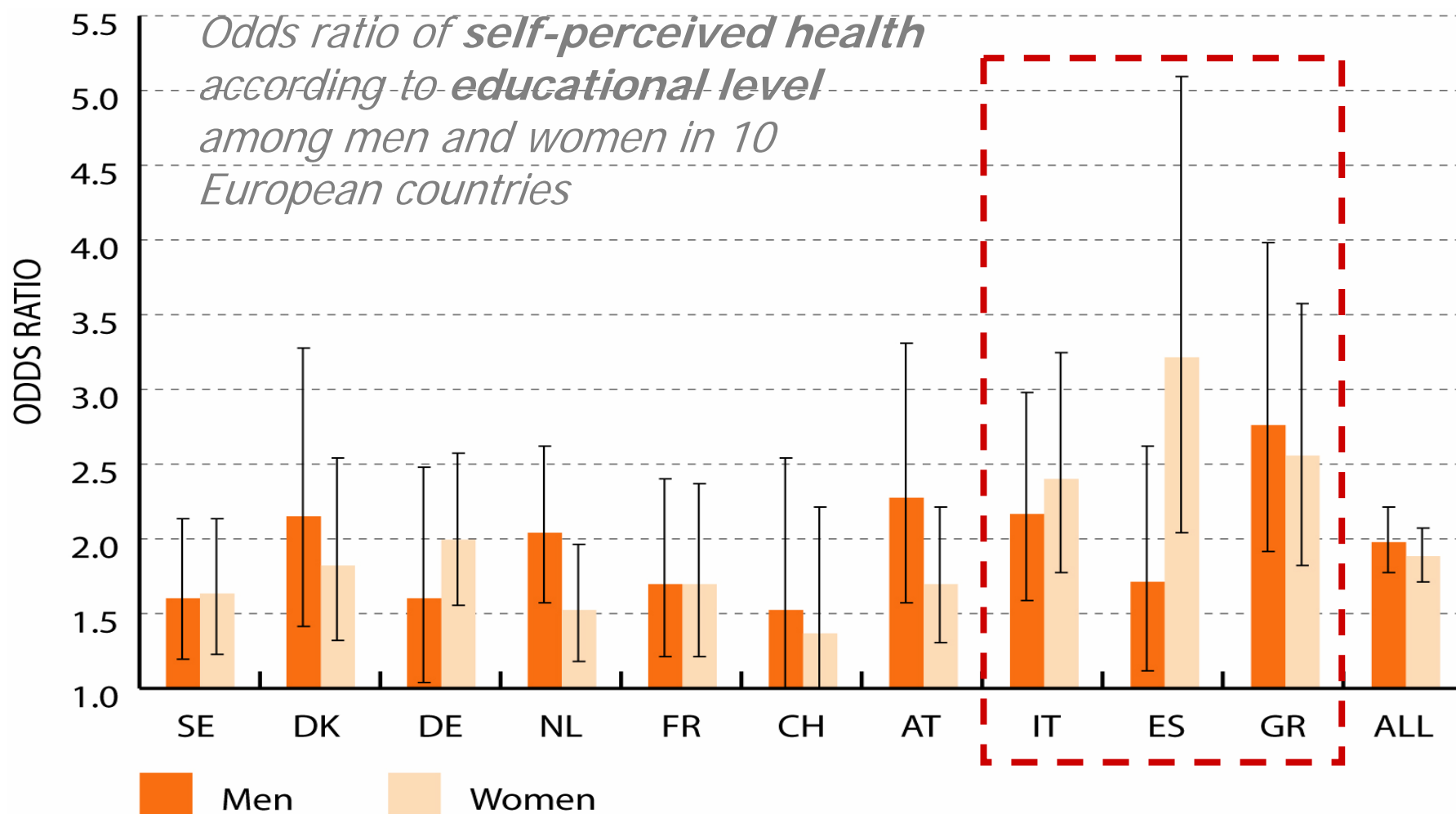


The socio-economic gradient of health

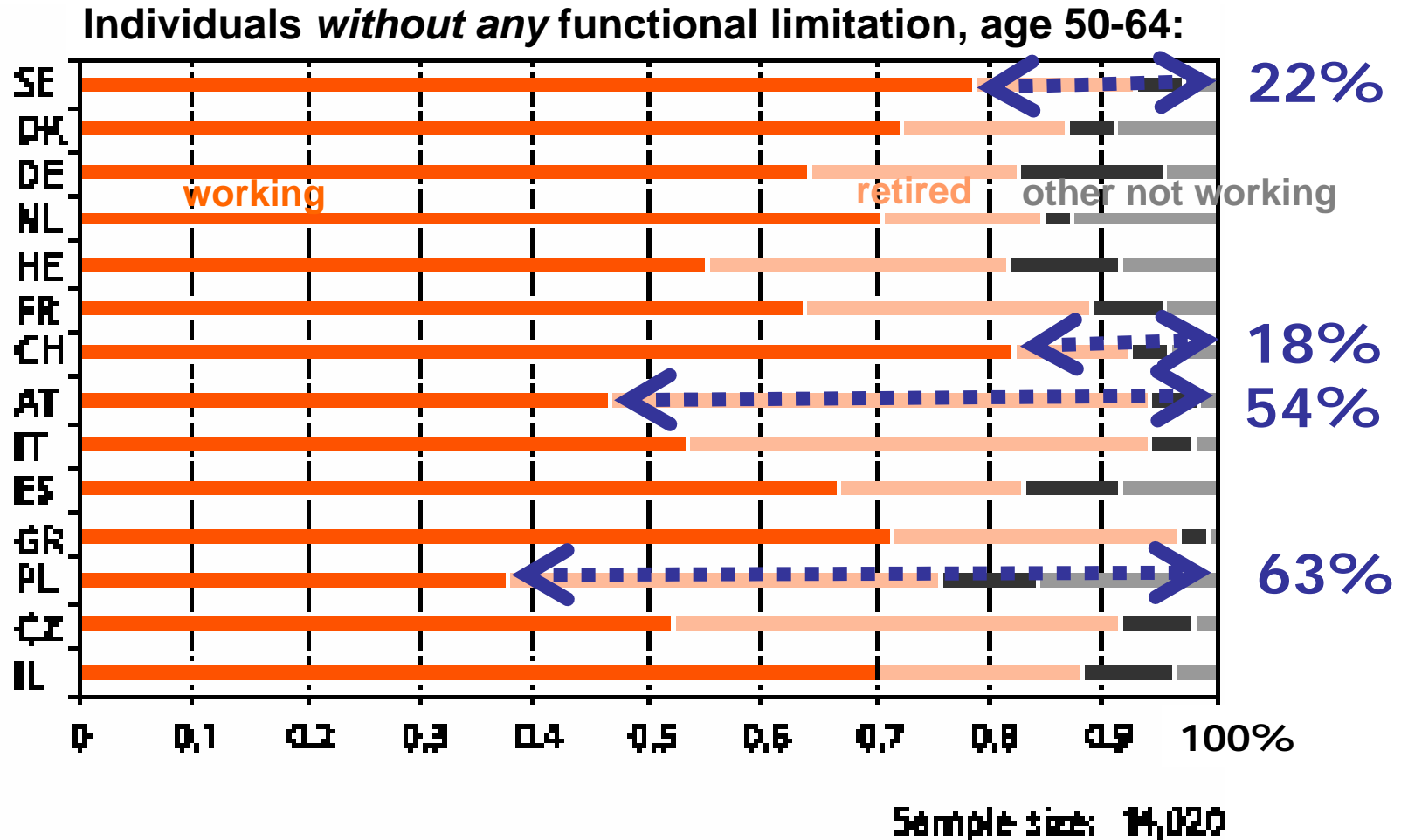




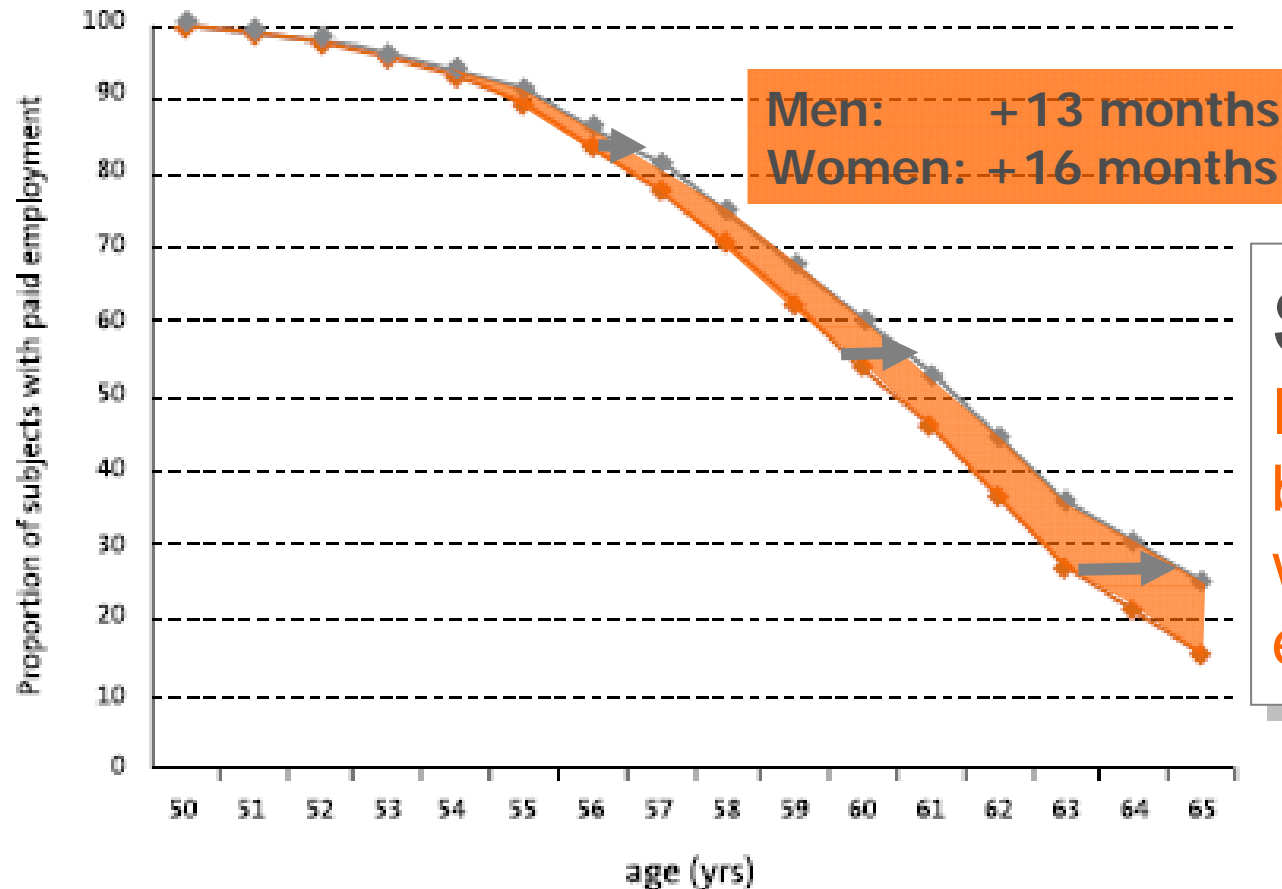
Socio-Economic Gradient: Detailed Picture by Country



Underused capacity



Nevertheless: Health as Investment



SHARE:
Interactions
between health,
work and socio-
economic status



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- Ageing is a serious and multifaceted challenge for Europe
- Not a given fate: many responses possible; turn challenges into chances!
- Need a crossnational, longitudinal and interdisciplinary research infrastructure...
...for evidence-based EU-policy
...for basic research on human behaviour
- Thank you!

