

# JOINT SHARE USER CONFERENCE AND BUDAPEST PENSION SEMINAR

Understanding Ageing Societies

19–20 September 2019 | Hungarian State Treasury  
Social Security Headquarters | Fiumei út 19/a | 1081 Budapest



## Imprint

The conference is jointly organized by the Munich Center for the Economics of Aging (MEA) at the Max Planck Institute for Social Law and Social Policy in Munich, the Institute of Economics of the Hungarian Academy of Sciences in Budapest and the Hungarian State Treasury.

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# 1. INTRODUCTION TO THE CONFERENCE

## Welcome to Budapest!

Thank you for accepting our invitation and participating in the Joint SHARE User Conference and Budapest Pension Seminar.

The Hungarian State Treasury has gone through a major reorganisation recently and by now, it has become the No 1 financial service provider and the only payment office of the budget administration. It has a number of responsibilities from financing local governments and state institutions through selling government bonds to managing social security, rural development and single payment scheme payments.

It is also important for our institution to be an active participant of public life, to promote wider discussions to important professional issues and to provide a platform for experts to exchange their views and ideas. We have been organising a conference in the 3<sup>rd</sup> week of September for 8 years. We call it Budapest Pension Seminar and we can say, with a bit of immodesty that it has become a significant event. The series of this international conferences we have organized so far included the conference on 'Lifecycles and Pension Systems' during the Hungarian Presidency in 2011 with Paola Profeta, Michael Murphy, Martin Werding and Alessandro Cigno presenting among others; and the annual conference of the European Institute of Social Security on 'Pension Systems in the Crisis: Response and Resistance' in 2012 with Laurence Kotlikoff and Michael Orszag as keynote speakers. In 2015 we hosted the 18<sup>th</sup> ISSA International Conference of Social Security Actuaries and Statisticians and in 2016 the bi-annual meeting of the International Microsimulation Association.

Our aim with the conferences is twofold: to put Budapest back on the map of professional meetings and to bring the world closer to the local professional community. We put a special emphasis on opening these events for interested students. I strongly believe that these events are perfect opportunities for all of us, experts and academics, to sit down together and discuss our views, research results, opinions and forecasts. Therefore, I am asking you to now make a note in your calendars so you remember that there is a pension conference at the end of September every year in Budapest.

I hope you will enjoy the SHARE User Conference and Budapest Pension Seminar, hear meaningful ideas and also enjoy your stay in Budapest.

*Prof. Dr. József Mészáros*  
*President of the Hungarian State Treasury*



## Welcome to the Joint SHARE User Conference and Budapest Pension Seminar!

Population ageing is one of Europe's most pressing problems. In order to meet its manifold challenges, scientific research is needed. SHARE fills this gap and collects data for this purpose. However, the most important step is the scientific work with this data – your work – that helps us to “read” the data and to understand the ageing process in its many facets.

To date, almost 10,000 researchers from a wide array of disciplines use SHARE data, which has already resulted in more than 2,500 publications. The programme of this conference reflects how researchers of different backgrounds and their different foci contribute to a comprehensive outlook on the social, economic and health situation of older people. More than 30 academic papers, presented in 16 sessions, offer insights on physical and mental health, loneliness, work and retirement, care, cognition, life course developments, intergenerational support and social networks. Together they help us to ***Understand Ageing Societies***.

I am particularly fascinated by the many papers that put life course developments in the foreground. Since health and overall wellbeing at older ages develop over the entire life course, SHARE's seventh wave asked respondents about their childhood, their lifetime health, their education and working histories, as well as their social and familial relationships throughout their life courses. The collected wealth of data allows for answering a variety of research questions in different fields, such as public health and epidemiology, sociology and economics.

At the moment, all of SHARE's participating countries are preparing the data collection for Wave eight, which will be completed by mid-2020. We at SHARE Central dedicate a lot of our work to infrastructural tasks, such as organising the data collection in all SHARE countries, developing the questionnaire, cleaning the data or doing methodological work. Therefore, it is especially rewarding for us to see how well our data is used by you, the researchers.

Thank you for attending the SHARE user conference. I look forward to engaging in fruitful discussions and listening to your contributions, new ideas and your take on SHARE. Your research is what SHARE thrives on and I hope that our infrastructure continues to support your work and helps answering new research questions.

I would also like to thank the Scientific Committee for their thorough reviews and engagement: Anikó Bíró, Johanna Bristle, Thorsten Kneip, Peter Lugtig, Michał Myck, Nadine Reibling, Annette Scherpenzeel, Ella Schwartz and Šime Smolić.

Great thanks go to our sponsors: the European Commission, many national ministries and research councils, and the US National Institute on Aging. I would also like to express my special gratitude to the Hungarian State Treasury, for generously supporting and hosting this conference at their Social Security Headquarters.

*Prof. Axel Börsch-Supan, Ph.D.  
SHARE Principal Investigator and SHARE-ERIC Managing Director*



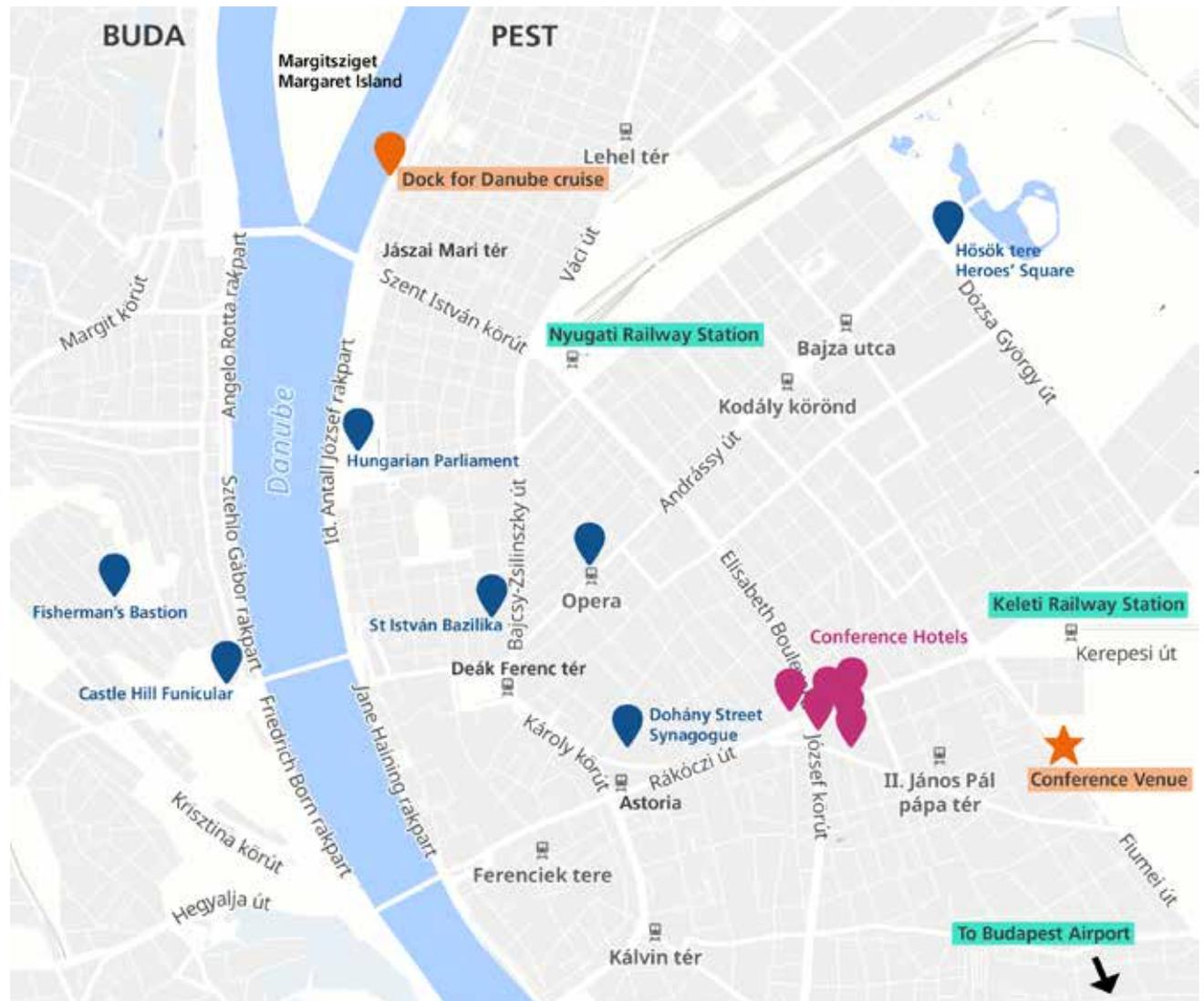
## 2. PRACTICAL INFORMATION

### Conference venue

Hungarian State Treasury  
 Social Security Headquarters  
 Fiumei út 19/a (Fiumei street 19/a)  
 1081 Budapest  
 HUNGARY

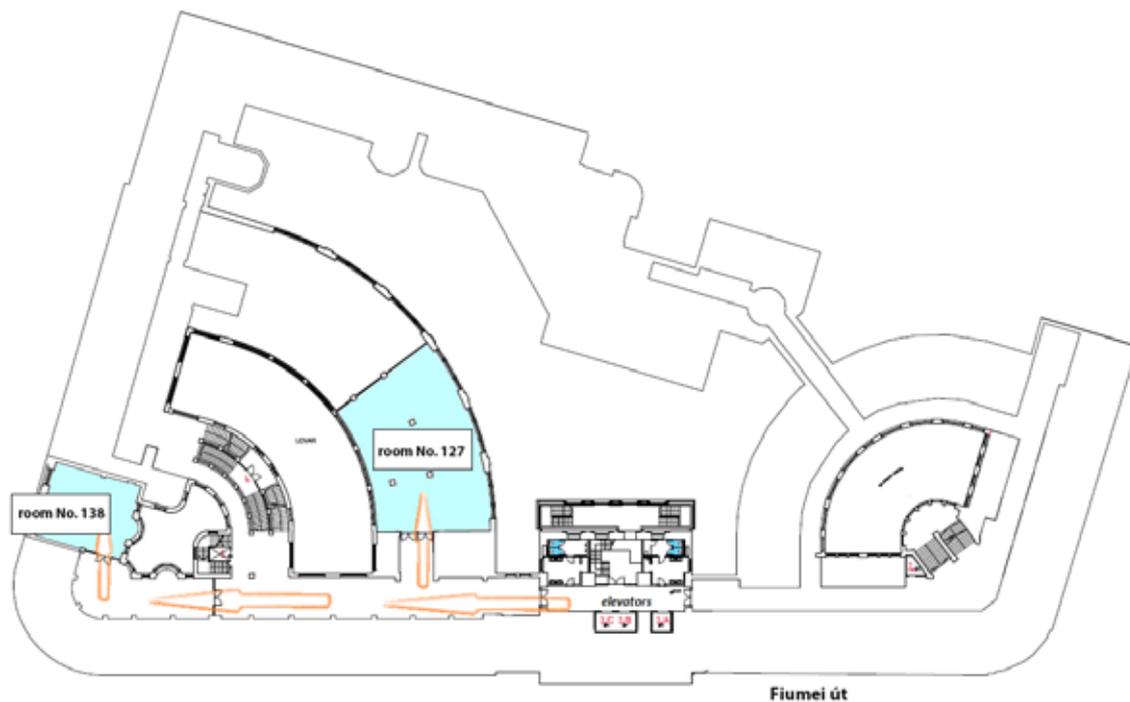


### Map

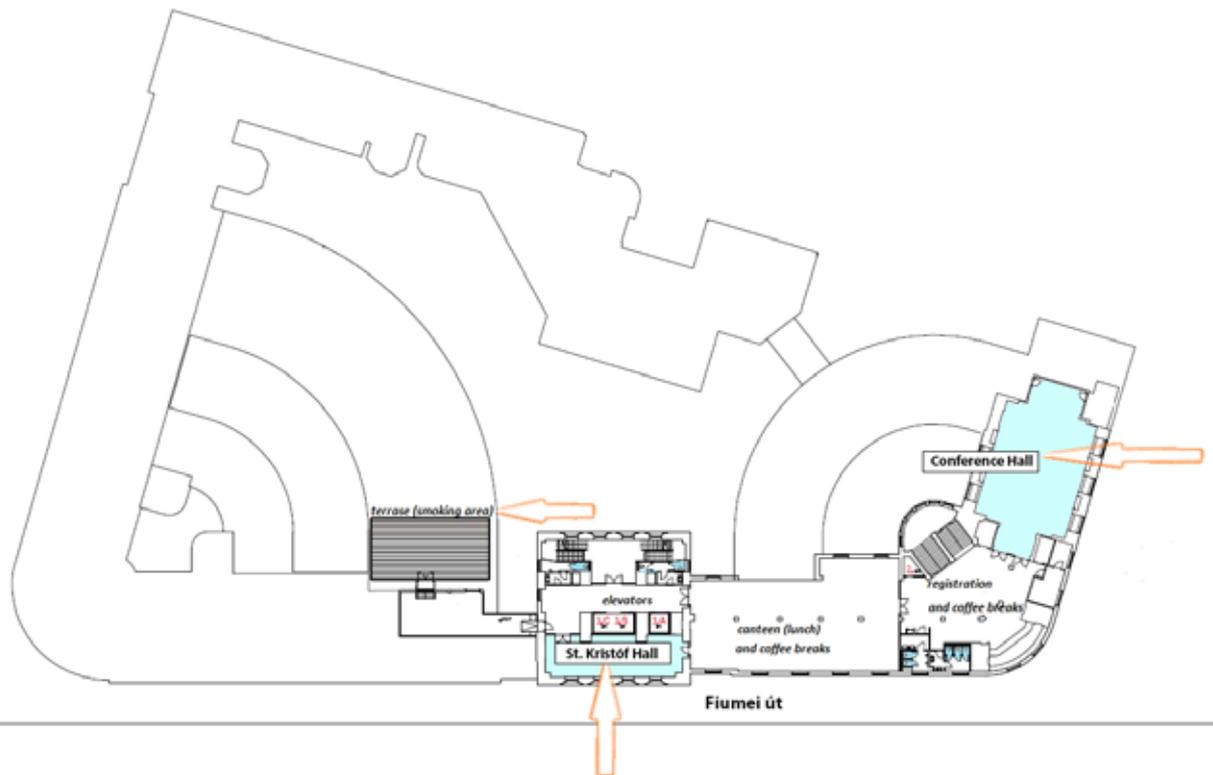


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### Floor plan (1<sup>st</sup> floor)



### Floor plan (5<sup>th</sup> floor)



### **Internet access at the conference venue**

There is free internet access in the conference building. Please refer to your personalized code and the description about how to connect to the internet. This information is provided in your conference bag and/or at the reception desk.

### **Conference website**

The conference website offers further information about sightseeing in Budapest and how to get around in the city: [tinyurl.com/UserconBudapest](http://tinyurl.com/UserconBudapest)

### **Conference rooms**

The main conference area is located on the 5<sup>th</sup> floor of the building. In addition, two rooms on the 1<sup>st</sup> floor are used for the Science Brief sessions.

The plenary sessions will take place in the Conference Hall on the 5<sup>th</sup> floor. The Science Briefs will take place in parallel in St Kristóf Hall (5<sup>th</sup> floor), room 127 (1<sup>st</sup> floor) and room 138 (1<sup>st</sup> floor). The agenda lists all sessions with the respective room numbers.

Registration is in the area outside the Conference Hall on the 5<sup>th</sup> floor. Lunch and coffee-breaks are also served on the 5<sup>th</sup> floor in the area between the Conference Hall and St Kristóf Hall.

### **Conference dinner**

The conference dinner will take place on Thursday, 19 September 2019 aboard a Danube cruise boat. Buses will pick us up right after the program at 18:00 and take us to the dock where we will start the cruise at 19:00. Dinner will be served on the boat. After the cruise at around 22:00 buses will take us back to the hotel area ("Keleti Pályaudvar/Blaha Lujza tér" area).

If you prefer to go directly to the dock: The boat "Ludwig" will leave from Szent István port dock no. 0 latest at 19:00.

### **Local organization committee**

In case you need any help during the conference, please feel free to contact Stephanie Lasson (SHARE) at the reception desk or send an email to the local Hungarian team at [cabinetintl@allamkincstar.gov.hu](mailto:cabinetintl@allamkincstar.gov.hu).

## Getting around Budapest

- **By Metro**

Printed information about fares and lines is provided at the reception desk or can be found online at: [www.bkk.hu](http://www.bkk.hu)

- **By Taxi**

Budapest's taxi drivers are not always prepared for English speaking clients – use one of the following major taxi companies with English switchboards to avoid problems:

Főtaxi ☎ +36-1 222-2222

City Taxi ☎ +36-1 211-1111

Tele 5 Taxi ☎ +36-1 555-5555

6x6 Taxi ☎ +36-1 666-6666

Do not accept offers from taxi drivers waiting in the airport terminals or railway stations. Ask about their price in advance or call any of the taxi companies above.

## How to get ...

### 1. from Budapest Airport to the city centre and the hotels

By taxi: Főtaxi provides stand-by cars right outside the arrivals side of Terminals 2A and 2B. There is an English-speaking dispatcher available outside the Terminals in the Taxi kiosk. The taxi ride to any of the listed hotels will cost approximately 7000 HUF (21 EUR).

By public transport: Bus 100E leaves every 20 minutes right from the arrivals side of Terminals 2A and 2B, and stops at three central locations: Kálvin tér (Kálvin square), Astoria and Deák Ferenc tér. The hotels are closest to Kálvin tér and Astoria. The bus tickets can be purchased from a machine right next to the bus stop at the airport and cost 900 HUF (3 EUR).

### 2. from Budapest Airport to the conference venue: Fiumei út 19/a, 1081 Budapest

By public transport: Take bus 100E from the airport until the first stop, Kálvin tér. Change to Metro Line 4 at Kálvin tér in the direction of Keleti Pályaudvar (Keleti railway station), and get off at II. János Pál pápa tér, the second stop. From II. János Pál pápa tér, the venue can be reached in about 7 minutes by foot along the park and Dologház utca. You will need two tickets, one for the bus (900 HUF / 3 EUR) and another one for the metro (350 HUF / 1.10 EUR).

**Sightseeing**

Printed information about what to do in Budapest is provided at the reception desk or can be found online at: [www.budapestinfo.hu](http://www.budapestinfo.hu)

**Currency**

The currency in Hungary is the Hungarian Forint (HUF). The exchange rate (as of June 2019) is approximately:

EUR 1.00 = HUF 324

USD 1.00 = HUF 289

ATM's are widely available and most major credit cards such as Visa, MasterCard, Diners Club and American Express are widely accepted in Budapest. Options for exchanging money are easy to find in Budapest.

**Climate**

The weather in September in Budapest is mild with an average minimum temperature of 12 °C and maximum of 22 °C. Local time: The local time is UTC/ (GMT) + 1 hour.

**Electricity**

The voltage of the electricity in Hungary is 220 volts (220V–240V); 50 Hz. The electrical sockets are one of the two European standard types: the Europlug and the Schuko.

## Information on formats

- Plenary sessions



Presentations should take 20 minutes on Thursday (plus 5 min for discussion) and 15 minutes on Friday (plus 5 min for discussion). Presenters should upload their presentation to the computer in the plenary room before the session begins. Presenters must bring their slides in PowerPoint or PDF format on a portable device.

- Parallel sessions: Science briefs



Science briefs should take 5 minutes only and provide information on key points and main discussion points (10 min discussion afterwards). The researchers should aim to brief their audience about their research to allow a fruitful discussion in the direction that is most helpful to their research. In case further information is needed, a handout is an optional complement. Presenters should upload their presentation to the computer in the correct room before the session begins. Presenters must bring their slides in PowerPoint or PDF format on a portable device.

- Roundtable session



The roundtable session is a set-up of several discussion groups on upcoming research topics, science communication and publication strategies. Researchers will shortly present their paper or perspective to spark a more general discussion on the research topic. The oral presentation should be short (~5min) and contain key points and main discussion points. If visualization or further information is needed, posters or graphs printed on A3 paper and an optional handout can be provided. Flip chart papers are available at each table to record the main ideas of the discussion group in order to make key points visible to the general audience afterwards. The audience is invited to stay at one table for the whole session or to move from table to table.

# 3. PROGRAMME OVERVIEW

## Day 1: Thursday, 19<sup>th</sup> September 2019

09:00	5 <sup>th</sup> floor	<i>Registration and coffee</i>	
09:30 – 10:00	Conference hall	<p>Welcome</p> <p>Annette Scherpenzeel <i>(International Coordinator of SHARE)</i></p> <p>József Mészáros <i>(President of the Hungarian State Treasury)</i></p>	
10:00 – 11:00	5 <sup>th</sup> floor	<p><b>Keynote speech</b></p> <p>Health and savings of older Europeans: Evidence from SHARE (p. 16)</p> <p>Viola Angelini <i>(Associate Professor, University of Groningen)</i></p>	
11:00	5 <sup>th</sup> floor	<i>Coffee Break</i> <i>SHARE user support in hallway</i>	
11:15 – 12:30	Conference hall	<p><b>Plenary session I: Pension and Policy</b></p> <p>– Chair: Axel Börsch-Supan <i>(Max Planck Institute for Social Law and Social Policy)</i></p>	
		<p>Do individuals adjust retirement expectations? Evidence from pension reforms in Europe (p. 17)</p> <p>Yuri Pettinicchi <i>(Max Planck Institute for Social Law and Social Policy)</i></p>	
		<p>Income inequality in disability-free life expectancy in Denmark (p. 17)</p> <p>Henrik Brønnum-Hansen <i>(University of Copenhagen)</i></p>	
		<p>Transition shocks during adulthood and health a few decades later in post-socialist Central and Eastern Europe (p. 18)</p> <p>Réka Branyiczki <i>(Central European University; TÁRKI)</i></p>	
12:30	5 <sup>th</sup> floor	<i>Lunch</i>	
13:45 – 15:30	Conference hall	<p><b>Plenary session II: Health and Ageing</b></p> <p>– Chair: Michael Hurd <i>(RAND Corporation)</i></p>	
		<p>How the season of birth affects health and aging (p. 18)</p> <p>Ana Lucia Abeliánsky <i>(University of Goettingen)</i></p>	
		<p>Trends in the prevalence of pain among adults aged 50+ across Europe, 2004 to 2017 (p. 19)</p> <p>Zachary Zimmer <i>(Mount Saint Vincent University)</i></p>	
		<p>Bereavement, social isolation and health (p. 19)</p> <p>Yarine Fawaz <i>(CEMFI)</i></p>	
15:30	5 <sup>th</sup> floor	<i>Coffee break</i>	
16:00 – 16:50		<p><b>Parallel Session: Science Briefs A</b></p>	
	Room 127 on 1 <sup>st</sup> floor	<p><b>A1: Mental health and well-being</b></p> <p>– Chair: Šime Smolić <i>(University of Zagreb)</i></p>	
		<p>The long-term effect of intra-European migration on subjective well-being (p. 20)</p> <p>Stefan Gruber <i>(Max Planck Institute for Social Law and Social Policy)</i></p>	
		<p>Separating age, period and cohort effects in health and cognition outcomes among the 50+ population (p. 20)</p> <p>Monika Oczkowska <i>(Centre for Economic Analysis CenEA)</i></p>	
		<p>Depression classes in Spanish older people: A latent class analysis approach (p. 21)</p> <p>José Manuel Tomás <i>(University of Valencia)</i></p>	

16:00 – 16:50	Room 138 on 1 <sup>st</sup> floor	<b>A2: Health care and health behaviours</b> – Chair: Alice Delerue Matos ( <i>University of Minho</i> )	
		Diabetes in Europe at older ages: prevalence, incidence, mortality and management (p. 21)	Péter Elek ( <i>ELTE; Hungarian Academy of Sciences</i> )
		Adverse childhood experiences and smoking behaviour: Evidence from SHARE countries (p. 22)	Cristina Orso ( <i>Ca' Foscari University of Venice</i> )
		Caring when you can't cure: Palliative care at the end of life in Europe (p. 22)	Anne Laferrère ( <i>University Paris-Dauphine</i> )
	St Kristóf hall on 5 <sup>th</sup> floor	<b>A3: Social context</b> – Chair: Ella Schwartz ( <i>Hebrew University of Jerusalem</i> )	
		Siblinghood in old age in Europe: An ego-centric, multilevel network approach (p. 23)	Jing-Yi Wang ( <i>University of Edinburgh</i> )
		The interplay of individual socioeconomic status, income inequality and welfare generosity in late-life loneliness: Evidence from Europe and China (p. 23)	Jing Wu ( <i>University of Gothenburg</i> )
	Is providing support to older parents detrimental to adult children's wellbeing? Evidence from selected European countries (p. 24)	Anita Abramowska-Kmon ( <i>Warsaw School of Economics</i> )	
17:00 – 17:50	5 <sup>th</sup> floor	<b>Roundtables of now and the future</b> Small group discussions on upcoming research topics, science communication and publication strategies. – Facilitator: Johanna Bristle ( <i>Max Planck Institute for Social Law and Social Policy</i> )	
		<b>R1: Care</b> – Host: Anne Laferrère ( <i>University Paris-Dauphine</i> )	
		What explains differences in long-term care needs across Europe? A research based on the seventh wave of SHARE data (p. 24)	Mercedes Sastre ( <i>Universidad Complutense de Madrid</i> )
		<b>R2: Cognition</b> – Host: Monika Oczkowska ( <i>Centre for Economic Analysis CenEA</i> )	
	Trends in cognitive impairment in the Czech Republic (p. 25)	Pavla Cermakova ( <i>Charles University and National Institute of Mental Health</i> )	

		<b>R3: Reaching out: how to communicate scientific results online</b> – Host: Andrej Srakar ( <i>University of Ljubljana; IER</i> )
		The SHARE Blog: new SHARE science communication tool
		Andrej Srakar ( <i>University of Ljubljana; IER</i> )
		How to get attention and make public aware of your research results? How to get your research across the world wide web? Which audience needs to be addressed outside of journals? Which channels to address for the promotion of ageing research?
		<b>R4: Editors' corner – Perspectives of journals</b> – Host: Pedro Mira ( <i>CEMFI</i> )
		What is the value of SHARE data from the perspective of journals? What do editors look for when deciding on manuscripts?
		<b>R5: Social policy</b> – Host: Platon Tinios ( <i>Piraeus University</i> )
		How can analyses with SHARE contribute to evidence based policy-making? What type of analyses are needed for policy-makers to be useful? How to be a social policy influencer? And why should you dare to be one?
		<b>R6: Open table for spontaneous topic</b>
18:00		Bus departure from Conference venue to Conference Dinner
19:00		Conference Dinner on Danube Cruise Ship

## Day 2: Friday, 20<sup>th</sup> September 2019

09:00 – 10:00	Conference hall	<b>Plenary session III: Life course perspectives</b> – Chair: Florence Jusot ( <i>University Paris-Dauphine</i> )
		Linked lives and couples' later life well-being in Finland and Germany: A three-channel sequence analysis of couples' life courses (p. 26)
		Miika Mäki ( <i>Population Research Institute</i> )
		Marriage stability and fertility after the death of a child (p. 26)
		Fabio Franzese ( <i>Max Planck Institute for Social Law and Social Policy</i> )
		The health gap for the self-employed in Europe (p. 27)
		Clémentine Garrouste ( <i>Université Paris-Dauphine</i> )
10:10 – 11:00		<b>Parallel Session: Science Briefs B</b>
	Room 127 on 1 <sup>st</sup> floor	<b>B1: Physical health</b> – Chair: Karen Andersen-Ranberg ( <i>University of Southern Denmark</i> )
		The socioeconomic status gradient in pain: A cross-country analysis (p. 27)
		Enrica Croda ( <i>Ca' Foscari University of Venice</i> )
		Persistence in inequalities of frailty at older age: A comparison of nine EU countries (p. 28)
		Florence Jusot ( <i>University Paris-Dauphine</i> )
		Multimorbidity and quality of life: findings from the European SHARE database, wave 6 (p. 28)
		Tatjana Makovski ( <i>Luxembourg Institute of Health; Maastricht University</i> )

10:10 – 11:00	Room 138 on 1 <sup>st</sup> floor	<b>B2: Work and retirement</b> – Chair: Sergio Perelman ( <i>University of Liège</i> )	
		Mothers' life course work and career choices and intergenerational ties at older age (p. 29)	Agnieszka Chłoń-Domińczak ( <i>Warsaw School of Economics</i> )
		Dynamic changes in determinants of inequalities in health in Europe with a focus on retirement: Extended results. (p. 29)	Jørgen T. Lauridsen ( <i>University of Southern Denmark</i> )
		Program evaluation and causal inference for distributional and functional data: estimation of the effects of retirement on health outcomes (p. 30)	Andrej Srakar ( <i>University of Ljubljana; Institute of Economic Research</i> )
11:00	St Kristóf hall on 5 <sup>th</sup> floor	<b>B3: Intergenerational transfers</b> – Chair: Arne Bethmann ( <i>Max Planck Institute for Social Law and Social Policy</i> )	
		Social inequalities in support patterns between multiple generations in Europe over time (p. 30)	Nekehia Quashie ( <i>Technical University of Dortmund</i> )
		Inheritances and gifts in European families: Between expectations and reality over time (p. 31)	Ronny König ( <i>University of Zurich</i> )
		Children's union status and contact with mothers: is the relationship causal? (p. 31)	Martin Kreidl ( <i>Masaryk University</i> )
11:00	5 <sup>th</sup> floor	Coffee Break <i>SHARE</i> user support in hallway	
11:30 – 12:30	Conference hall	<b>Plenary session IV: Cognition and Care</b> – Chair: Annette Scherpenzeel ( <i>Max Planck Institute for Social Law and Social Policy</i> )	
		Pathways from social activities to cognitive functioning (p. 32)	Ella Schwartz ( <i>Hebrew University of Jerusalem</i> )
		Childhood poverty and cognitive trajectory among older Europeans (p. 32)	Gindo Tampubolon ( <i>University of Manchester</i> )
		Do gender employment gaps affect the caregiving to older individuals? Evidence from European countries (p. 33)	Eric Bonsang ( <i>Université Paris-Dauphine</i> )
12:30	Conference hall	Closing  Axel Börsch-Supan ( <i>Principal Investigator of SHARE</i> )	
12:45	5 <sup>th</sup> floor	Lunch	

## 4. SCIENTIFIC PRESENTATIONS

### Keynote speech

📅 **Day 1: Thursday, 10.00 – 11.00**

📄 **Keynote speech**

👤 **Chair: Annette Scherpenzeel (Max Planck Institute for Social Law and Social Policy)**

Conference hall

Viola Angelini is Associate Professor at the Faculty of Economics and Business at the University of Groningen since 2016. In addition, she is a NETSPAR research fellow and an external affiliate of the Health, Econometrics and Data Group of the University of York. Her research agenda focuses on applied micro-econometrics, household saving and consumption, health economics and the economics of ageing. In the early years of SHARE, Viola Angelini was a postdoctoral research fellow for SHARE and has since used the SHARE data extensively for high-quality publications. Actually, apart from professors who coordinate(d) SHARE for many years, we can proudly say that she is the SHARE user with the most SHARE-based publications.



### Health and savings of older Europeans: Evidence from SHARE

*Viola Angelini (University of Groningen)*

Population ageing is the most important demographic trend of this century. The combination of declining fertility rates and increasing longevity implies that the share of the population above the age of 65 is rapidly increasing in all developed countries. The rise in life expectancy has resulted in an increase in the number of years that people spend in retirement or between the onset of major health problems and the end of life. From both an academic and a policy perspective, the challenge is then to make people live longer in good financial, physical and mental health. In this respect, the data from SHARE can help us answer important questions: What drives saving behavior of European households? Do people save enough for retirement? What is the relationship between early-life conditions and healthy ageing? In my presentation I will discuss some of my research which tries to address these questions using the SHARE data.

## Scientific Presentations

 **Day 1: Thursday, 11.15 – 12.30**

**Conference hall**

 **Plenary session I: Pension and Policy**

 Chair: Axel Börsch-Supan (Max Planck Institute for Social Law and Social Policy)

### **Do individuals adjust retirement expectations? Evidence from pension reforms in Europe**

*Tabea Bucher-Koenen (Leibniz Centre for European Economic Research), Irene Ferrari, Yuri Pettinicchi (Max Planck Institute for Social Law and Social Policy)*

This paper exploits time as well as cross-country variation in pension regulations by using Waves 1 to 6 of the Survey of Health, Ageing and Retirement in Europe (SHARE), matched with external policy data (full and early retirement ages in Europe for the period 2004–2015). We run a fixed effect model, where the dependent variable is the expected age of first benefit collection and the right hand side variable of interest is the statutory age of retirement. We obtain a positive and precisely estimated effect, such that for each year of increase in the statutory retirement age, individuals expect to be able to collect their first pension on average three months later. In further analysis, we try to discern the origin of such incomplete adaptation of expectations, and to investigate the heterogeneity of the result across different individuals. We show that higher numeracy as well as higher education lead to larger expectations revision.

### **Income inequality in disability-free life expectancy in Denmark**

*Henrik Brønnum-Hansen, Else Foverskov, Ingelise Andersen (University of Copenhagen)*

**Objectives:** The state old-age pension in Denmark is adjusted in line with the projected increasing life expectancy without taking social inequality into account. The purpose of the study was to estimate income disparities in life expectancy and disability-free life expectancy (DFLE) at age 50. **Methods:** By linking nationwide register data on equivalised disposable income and mortality, life tables by income quartile were constructed. Also SHARE data was linked to register data providing access to information on respondents income. Finally, for each income quartile life table data and prevalence on activity limitations from SHARE were combined to estimate DFLE and differences by income were investigated. **Results:** Life expectancy at age 50 differed between people in the highest and lowest income quartile by 8.0 years for men and 5.0 years for women. The difference between income quartile 1 and 4 in DFLE was 11.8 and 10.3 years for men and women. **Conclusions:** Although the income inequality in life expectancy and DFLE can partly be explained by loss of income due to chronic diseases, one would expect a welfare state to provide better financial security for citizens with health problems. The fairness of implementing a pension scheme independently of socioeconomic position is questioned.

## Transition shocks during adulthood and health a few decades later in post-socialist Central and Eastern Europe

Anikó Bíró (Hungarian Academy of Sciences), Réka Branyiczki (Central European University; TÁRKI)

Health of the population of post-socialist Central and Eastern European (CEE) countries lags behind the European Union average. Our aim in this paper is to analyse the link between transition shocks and health two-three decades later. We use retrospective data from the Survey of Health, Ageing and Retirement in Europe. We estimate the implications of stressful periods, financial hardships and job loss occurring around the transition (1987–1993) on subjective and objective measures of health in 2017. We compare these implications across groups of CEE countries and with the health implications of similar difficulties reported by individuals from Western Europe, and of difficulties occurring before or after the transition. In the CEE region there is a peak in the timing of difficulties around the transition. Stressful periods, financial difficulties and job loss around the period of transition are generally associated with worse health at older ages in all groups of CEE countries, even after netting out the effect of childhood health and demographic factors. However, the consequences of hardships due to the transition are not specific, health implications of these difficulties seem to be similar to the implications of other shocks possibly unrelated to the transition. Not the nature of the difficulties, but the high fraction of individuals experiencing them around the transition increased the current health disadvantage in the CEE region. Our results draw the attention to the long-lasting impacts of psychosocial stress and financial hardship during adulthood on later health.

📅 **Day 1: Thursday, 13.45 – 15.30**

**Conference hall**

📄 **Plenary session II: Health and Ageing**

👤 Chair: Michael Hurd (RAND Corporation)

## How the Season of Birth Affects Health and Aging

Ana Lucia Abeliánsky, Holger Strulik (University of Goettingen)

We investigate how the season of birth is associated with human health and aging. For this purpose, we use five waves of the Survey of Health, Ageing, and Retirement in Europe (SHARE) dataset and construct a health deficit index for 21 European countries. Results from log-linear regressions suggest that, on average, elderly European men age faster when they were born in spring and summer (compared to autumn). At any given age, they have developed about 3.5 percent more health deficits. The bulk of the seasonal effect is neither mediated through body height nor through education. In a subsample of Southern European countries, where the seasonal variation of sunlight is smaller, the birth season plays an insignificant role for health in old age. In a subsample of Northern countries, in contrast, the seasonal effect is larger. At any given age, elderly Northern European men born in spring have developed, on average, 8.7 percent more health deficits than those born in autumn. In non-linear regressions we find that the seasonal effect increases with age suggesting that the speed of aging is also associated with the birth season.

## **Trends in the Prevalence of Pain among Adults Aged 50+ Across Europe, 2004 to 2017**

*Zachary Zimmer (Mount Saint Vincent University), Anna Zajacova (University of Western Ontario), Hanna Grol-Prokopczyk (University at Buffalo)*

Although chronic pain is a global health priority, few studies have monitored and compared trends in pain using population-level generalizable samples. SHARE data provides an opportunity for this type of analysis. The purpose of this research is to examine trends in pain between 2004 and 2015; assess the degree to which trends are consistent across 15 countries (Austria, Belgium, Czech Republic, Denmark, Estonia, France, Germany, Italy, Luxembourg, Netherlands, Poland, Slovenia, Spain, Sweden, and Switzerland); and determine whether changes in prevalence are robust to changes in the following population-level covariates: age, sex, marital status, education, chronic diseases, obesity and depression. Results indicate statistically significant increases in prevalence occurred across half of the countries, while no country experienced a statistically significant decline. Pooling data, between 2004 and 2011 each year that passed associated with an increase in fully adjusted odds of reporting pain by a factor of 1.02 ( $p < .01$ ). Between 2013 and 2015 the increase was 1.06 ( $p < .01$ ). Despite variation across countries, consistency in trends and robustness across changes in population characteristics between the years 2004 to 2015 indicate alarming patterns of rising pain prevalence with no indication that these increases in prevalence will halt or reverse in the near future.

## **Bereavement, social isolation and health**

*Yarine Fawaz, Pedro Mira (CEMFI)*

Loneliness and social isolation may be one of the next big public health issues in rich economies. According to recent studies, being – whether feeling or not – lonely, and being socially isolated, i.e. lacking social connections, is at least as devastating to a person's health as being obese or a heavy smoker (Holt-Lunstad et al. 2015). We aim at investigating the causal relationship between loneliness and social isolation, and individuals' health, using unique features of the SHARE data. To do so, we look at how changes in the loneliness and social isolation indicators impact changes in health outcomes, controlling for baseline characteristics (including baseline health). We make use of an instrumental variable strategy in order to make sure changes in the loneliness and social isolation indexes are neither due to a declining health status nor to an omitted variable that would impact both loneliness and health. Our instrument uses death events that occur between two waves to a member of a respondent's social network. We treat health as a multifaceted concept encompassing mental, physical functional, and cognitive health. Although very preliminary, our results suggest both loneliness and social isolation lead to worse health along several dimensions. The first stage also yields interesting results, as they confirm a negative impact of bereavement on an individual's social network and his/her feelings of loneliness.

📅 **Day 1: Thursday, 16.00 – 16.50**

**Room 127**

▣▣▣ **Parallel Session: Science Briefs A**

**A1: Mental health and well-being**

👤 **Chair: Šime Smolić (University of Zagreb)**

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### **The long-term effect of intra-European migration on subjective well-being**

*Stefan Gruber, Gregor Sand (Max Planck Institute for Social Law and Social Policy)*

Even though the individual circumstances and driving forces of migration may differ, the majority of migrants who moved to a wealthier country share a common goal: the improvement of economic living conditions and quality of life. But does migration really pay off in the long run? Using all regular SHARE panel waves, this paper focuses on the long-term impact of migration by comparing the income and subjective well-being (SWB) of migrants from Southern and Eastern Europe to both natives in the destination country and stayers in the origin country. Results from random effects regression models show that migration generally does pay off in economic terms. However, the SWB outcome is associated with the relative income position within the destination country. Therefore, achieving a similar income position relative to natives might play a decisive role in determining good well-being and successful aging of migrants in the long run.

### **Separating age, period and cohort effects in health and cognition outcomes among the 50+ population**

*Michał Myck, Monika Oczkowska (Centre for Economic Analysis CenEA)*

In most of the developed countries ageing societies and increased longevity contribute to growing significance of the issues such as future health care costs or care needs of the 50+ population. The ability to determine how changes in health and cognition are related with ageing, whether this relation differs between cohorts and whether there are any time trends in health/cognition changes valid for the whole population may provide useful insights for policy makers. In this paper we exploit the richness of the SHARE data which enables us to conduct analysis of differences in age trajectories of health between birth cohorts at several points in time from 9 European countries. For the health and cognition indicators we take difficulties with basic mobility activities, grip strength measurement, symptoms of depression and two cognitive tests of word fluency and recall ability. After the initial graphical analysis, we make some inevitable assumptions for the complimentary regression estimations. We assume no time effect, which should be easy to justify when physical health and cognition are concerned, with less obvious arguments for depression. When analyzing physical and mental health outcomes, we find negligible period effects and polynomial (quadratic) function for the age effect. On the other hand, for cognitive skills, cohort effects seem to play the key role.

### Depression classes in Spanish older people: A latent class analysis approach

Sergio Pérez-Belmonte, Laura Galiana, Laura Badenes-Ribera, Irene Fernández, José Manuel Tomás  
(University of Valencia)

Major depressive disorder is one of the most disabling disorders worldwide, being the one that contributes the most to disability, with 7.5% prevalence in the world and 8.7% in Spain. The aim of this work is to offer evidence on the clinically relevant subtypes of depression that exist in the Spanish older adult's population. This paper uses data from SHARE Wave 6. In the present study, we focused on the Spanish sub-sample at Wave 6. Inclusion criteria were a) aged 60+; and b) presence of clinical depression (cut-off of 6 in EURO-D). There were 612 participants. Latent Class Analyses (LCAs) were estimated. Three classes were the best solution. Class 1 was characterized by higher probabilities of being sad or depressed, sleep disturbances, irritability, fatigue, and tears, with medium to low probabilities of the other symptoms. Class 2, was characterized by higher probabilities of pessimism, suicidal feelings, or feelings of guilt. And, finally, class 3 showed higher probabilities of loss of interest, loss of concentration, and failing to enjoy with any activity; with low to medium probabilities of symptoms such as suicidal feeling, feelings of guilt or irritability. Classes of depression were similar to one found in the literature.

 **Day 1: Thursday, 16.00 – 16.50**

**Room 138**

 **A2: Health care and health behaviours**

 **Chair: Alice Delerue Matos (University of Minho)**

### Diabetes in Europe at older ages: prevalence, incidence, mortality and management

Anikó Bíró (Hungarian Academy of Sciences), Péter Elek (ELTE; Hungarian Academy of Sciences)

Our aim is to document the cross-country differences in the prevalence, incidence and mortality of diabetes in Europe, and to relate these variations to cross-country differences in diabetes management and lifestyle. We use data from waves 1–2 and 4–7 of SHARE. We estimate multivariate linear regressions and multilevel mixed-effects logistic regressions, where the key outcome variables are: having ever been diagnosed with diabetes; new diagnosis with diabetes; mortality; and various indicators of health behaviour such as weight loss due to diet. We also investigate the residual cross-country differences in health behaviours, and relate them to the observed patterns of diabetes prevalence and incidence. Our results indicate that gender, age, gender-age interaction, overweight, obesity and diagnosis with hypertension explain around one-third of the cross-country variation in diabetes prevalence. The difference between the mortality of the diabetic and non-diabetic individuals is about 10 %points, which halves if age, gender, hypertension, overweight, calendar year and country effects are controlled for. While average mortality is higher in the post-socialist countries, the additional mortality of diabetic individuals is not higher there. Our results also suggest that cross-country differences in health behaviours are important contributors to the socio-economic and cross-country variations in the prevalence and incidence of diabetes in Europe.

**Adverse childhood experiences and smoking behaviour: Evidence from SHARE countries**

*Agar Brugiavini, Raluca E. Buia, Matija Kovacic (Ca' Foscari University of Venice), Cristina E. Orso (University of Verona)*

In this paper, we investigate whether exposure to adverse experiences during childhood such as physical and emotional abuse affects a set of health and socio-economic outcomes across the lifespan using recent European data from SHARE (The Survey of Health, Ageing and Retirement in Europe). The novelty of our approach consists in exploiting the recently published data on adverse childhood experiences for 19 SHARE countries, which enables us to account for country-specific heterogeneity and investigate the long-run effects of exposure to early-life adverse circumstances on different adult outcomes. Our results highlight a negative long-term effect of exposure to ACEs on risk behaviours such as smoking, as well as on SES outcomes like unemployment experiences and family dissolution.

**Caring when you can't cure: Palliative care at the end of life in Europe**

*Anne Laferrère (University Paris-Dauphine)*

People are dying older, hence more likely to have been in need of old age care. The demand for palliative care, the non-curative supportive care in the ultimate months of life is also increasing. New questions from the "end of life" questionnaire of SHARE are used to explore palliative care (PC) reception among the deceased aged fifty and over in seventeen European countries. Eighty percent needed help with pain, breathing or anxiety in the last month of their life, a rate twice than that of those deemed to need PC. While the need for help with either pain, breathing or anxiety did not differ by country, PC was deemed less needed in some – mostly east European – countries. For one in five of those who received PC, at least one of the three ailments was not taken care of properly. Controlling for needs, a higher level of education increased adequate palliative care reception, pointing to inequality in information about PC. Professional care received in the last month of life was less likely to be rated very good or excellent when PC was needed and not available or when the three ailments were not dealt with properly. Dealing with anxiety seems to be the most difficult.

📅 **Day 1: Thursday, 16.00 – 16.50**

**St Kristóf hall**

■ ■ ■ **A3: Social context**

👤 **Chair: Ella Schwartz (Hebrew University of Jerusalem)**

### **Siblinghood in old age in Europe: An ego-centric, multilevel network approach**

*Jing-Yi Wang (University of Edinburgh)*

Brothers and sisters can be the family members whom people know the longest of all those in their life, an area of research which has been long neglected. This early-stage research project aims to investigate which characteristics of the social network and social ties are related to the inclusion of siblings in the network, and what roles adult siblings play in older Europeans social network. From the perspective of the complementary hypothesis, I suggest that people with more family members in their networks not including siblings as family members are more likely to have siblings in this network. Although siblings are included in the network, they do not have as much contact frequency as other family members with respondents. In contrast, from the compensatory perspective, I hypothesise that the fewer family members in the network (not including siblings as family members), the more likely they are to have siblings in the network. The early findings show that the number of sibling ties for respondents who mentioned their parents in their network is higher in the network than those who did not, while having children in the network is negatively associated with the inclusion of siblings.

### **The interplay of individual socioeconomic status, income inequality and welfare generosity in late-life loneliness: Evidence from Europe and China**

*Jing Wu (University of Gothenburg), Jing Zhang (Erasmus University Rotterdam), Tineke Fokkema (Erasmus University Rotterdam; Netherlands Interdisciplinary Demographic Institute (NIDI-KNAW), University of Groningen)*

Individual-level socioeconomic status exerts a crucial influence on whether and to which degree older people have the opportunity to achieve social relations and participate in social life and in turn impacts on loneliness. Income inequalities lead to perceptions of relative deprivation and distrust and in turn produce loneliness. Welfare generosity is linked to the predictors of loneliness among older people. The overarching aim of the study is to explore whether country-level income inequality and welfare generosity moderate the effect of the individual-level socioeconomic risk factors on late-life loneliness. Data were obtained from the HRS-family of surveys – the Survey of Health, Ageing and Retirement in Europe (SHARE) (wave 5, 2011/12) and China Health and Retirement Longitudinal Study (CHARLS) (wave 2, 2012/13). Respondents aged 50 years and over from twelve European countries and China were included in the study. Logistic country fixed effect (FE) models were utilized in the analysis. The individual's socioeconomic status was associated with loneliness in each country. As household income decreased, the risk of feeling lonely increased. The findings reveal that income inequality and welfare generosity modified the association between individual-level household income and the risk of feeling lonely. The interactive effects hold true after controlling for covariates.

## Is providing support to older parents detrimental to adult children's wellbeing?

### Evidence from selected European countries

*Anita Abramowska-Kmon, Milena Milan (Institute of Statistics and Demography, Warsaw School of Economics)*

Adult children are the main source of instrumental and emotional support for aging parents. Providing regular care to older people may affect many aspects of caregivers' life, such as: physical and mental health, financial situation, social contacts etc. The main aim of the paper is to examine the effects of providing informal care to older parents on subjective quality of life among caregivers aged 45–69 in selected European countries. We analyze the data coming from Survey of Health, Ageing and Retirement in Europe (SHARE). The results demonstrate that providing regular personal care to an older parent may be detrimental to subjective quality of life of adult children. Also, the outcomes show that the negative relationship between caregiving and subjective well-being applies mostly to women. Regular personal care provided to a mother was of greater importance for adult children well-being than regular support given to a father or both parents. The negative association between giving regular personal care to a parent and adult children's wellbeing seems to occur mostly in Western and Central-European countries as it may reflect the differences between analysed countries in existing care arrangements for older individuals.

 **Day 1: Thursday, 17.00 – 17.50**

**5<sup>th</sup> floor**

 **Roundtables of now and the future**

**R1: Care**

 **Host: Anne Laferrère (University Paris-Dauphine)**

## What explains differences in long-term care needs across Europe?

### A research based on the seventh wave of SHARE data

*Mercedes Sastre (Universidad Complutense), Rosa Martínez (Universidad Rey Juan Carlos)*

Demographic ageing is increasing the demand for long-term care (LTC) in developed countries. The adequate provision of long-term care requires a good understanding of current long-term care needs and their determinants. The aim of this paper is to provide empirical evidence on this topic, analysing how LTC needs of elderly people differ across countries and what factors explain these differences. To that end, we use the data from the seventh wave of the Survey of Health, Ageing and Retirement in Europe (SHARE), whose reference year is 2017. The paper is divided into two parts. The first part provides a comparative analysis of LTC needs of people aged 65 and over in a set of countries representing different models of LTC provision. To that end, we use a measure based on the degree of difficulties with basic and instrumental daily living activities. Preliminary results show that the proportion of elderly showing LTC needs is lowest in countries such as Switzerland, Sweden and Finland, and highest in Poland, Lithuania, Spain and Romania. The second part of the paper examines to what extent differences in personal characteristics and contextual (country-specific) factors can explain country differences in the proportion of elderly people in need of LTC, using multilevel models.

📅 **Day 1: Thursday, 17.00 – 17.50**

5<sup>th</sup> floor

🌟 **R2: Cognition**

👤 Host: Monika Oczkowska (Centre for Economic Analysis CenEA)

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### **Trends in cognitive impairment in the Czech Republic**

*Pavla Cermakova (Charles University and National Institute of Mental Health), Dominika Seblova (Karolinska Institutet), Carol Brayne (University of Cambridge)*

Studies from North America and Western Europe suggest positive changes in cognition across birth cohorts. We aimed to examine changes in the age-specific prevalence of cognitive impairment in the Czech Republic. The study uses a Czech sample of the population-based Survey on Health, Ageing and Retirement in Europe. The age-specific prevalence of cognitive impairment (defined based on scores in verbal fluency, immediate recall, delayed recall and temporal orientation) was compared between participants in wave 2 (2006/2007; n=1 107) and wave 6 (2015; n=3 104). Logistic regression was used to estimate the association of wave 6 with cognitive impairment, step-wise adjusting for sociodemographic and clinical characteristics. The most conservative estimate suggests that the age-specific prevalence of cognitive impairment declined by one fifth, from 11% in 2006/2007 to 9% in 2015. Decline was observed in all sensitivity analyses. This change was associated with differences in education, depression and cardiovascular factors. The trends in cognitive health in the Czech Republic seem to be mirroring developments in Northern America and Western Europe. Positive developments in education, depression and cardiovascular factors seem to be of key importance.

📅 **Day 2: Friday, 9.00 – 10.00**

**Conference hall**

📄 **Plenary session III: Life course perspectives**

👤 **Chair: Florence Jusot (University Paris-Dauphine)**

**Linked lives and couples' later life well-being in Finland and Germany:  
A three-channel sequence analysis of couples' life courses**

*Miika Mäki (Population Research Institute, Väestöliitto), Anna Rotkirch (Population Research Institute, Väestöliitto), Katja Möhring (University of Mannheim), Andreas Weiland (University of Mannheim)*

We study couple's life courses in a comparative perspective, applying multichannel sequence analysis (MCSQA) to the life courses of couples of the birth cohorts 1926–1967 in Finland, East- and West-Germany covering the age-span 18 to 50 (N=2428). Based on life history information from the Survey of Health, Ageing and Retirement in Europe (SHARE) for the subdomains working life and fertility we define three channels including both spouses' employment histories and their common fertility history. Our three country cases represent different types of welfare and gender regimes, and partly diverging historical developments. Based on comparative welfare state and household bargaining theory we present a theoretical framework to explain cross-national and cross-cohort differences in couples' life course arrangements. Using MCSQA, we identify clusters of couples' life courses, which cover range from male breadwinner to dual earner couples, and link these to women's later life income as a first step. We plan to include measures of subjective well-being, grip-strength and childhood conditions in the next step.

**Marriage Stability and Fertility after the Death of a Child**

*Fabio Franzese (MEA, Max Planck Institute for Social Law and Social Policy)*

Parents face great suffering when their children die. Parental grief is particularly associated with emotional stress, which could manifest in the form of diminished quality and stability of the parents' relationship. Another possible consequence of a child's death is the parents choosing to have another child. This study examines whether the death of a child is connected to divorce risk and fertility of the bereaved parents. To that end, retrospective life interviews collected by the Survey of Health, Ageing, and Retirement in Europe (SHARE) and the English Longitudinal Study of Ageing (ELSA) are exploited. Event history analyses are performed. First results indicate that the effect of bereavement on divorce risk has changed over the last century: In recent decades, the death of a child has been connected to a lower risk of divorce. This, however is only true for couples who had another child after bereavement (replacement fertility), as is shown by further results. Concerning fertility, the analyses find that at same parity (i.e., number of births), bereaved parents are more likely to have another child compared to parents that did not experience the death of a child.

## The Health Gap for the Self-Employed in Europe

Nicolas Sirven (*LIRAES, Université Paris-Decartes, IRDES*), Alain Paraponaris (*AMSE, IRDES*), Clémentine Garrouste (*LEda-LEGOS, Université Paris Dauphine, PSL*)

In this paper, we investigate the link between self-employment and health. Using panel data from the Survey of Health, Ageing and Retirement in Europe (SHARE) between 2004 and 2015, we expanded the scope of analysis beyond the usual working-life period, ie for Europeans aged from 50 years onwards. Self-employment status is defined for the working population as the share of individuals who currently work for themselves, while fully retired individuals are asked whether they previously worked as self-employed in their life. We used a dynamic model for health and health care use that allow controlling for potential endogeneity issues associated with the occupational status (Arrellano and Bond, 1991).

Using objective measures of health, we found that self-employed workers have better physical health than wage-workers during their active working life, potentially due to a selection effect. We also found evidence of a stronger depreciation of health capital over time, leading to worse physical condition of self-employed at older ages.

 **Day 2: Friday, 10.10 – 11.00**

**Room 127**

 **Parallel Session: Science Briefs B**

**B1: Physical health**

 **Chair: Karen Andersen-Ranberg (University of Southern Denmark)**

## The Socioeconomic Status Gradient in Pain: A Cross-Country Analysis

Enrica Croda (*Ca' Foscari University of Venice*)

Chronic pain has an important impact on peoples' lives and is a fundamental dimension of wellbeing. Our current understanding of people's pain experiences has been largely limited by data availability. In this paper, I exploit newly available harmonized data from SHARE and HRS to investigate the existence of sex disparities in pain and the extent to which pain is associated with socioeconomic status in mid-life in Europe and the US. Specifically, I use SHARE waves 5, 6 and 7, and the corresponding HRS waves to study whether: (i) sex-based differences in pain are relatively similar across countries, (ii) country-specific characteristics matter the most for people in the bottom of the income distribution, and (iii) greater use of pain medication reduces aggregate pain. I find that pain is part of life for two out of five midlife individuals, with wide heterogeneity across countries. In every country, more women are bothered by pain than men, and the gender gap differs across countries. In Europe as well as in the US, individuals with low levels of education are much more likely to be troubled by pain than those with higher educational attainments. The reporting of pain shows a strong gradient also according to income, across all the countries, and there is more country-level variation in the lowest income quintile. What can explain this strong association between pain and socioeconomic status and the observed disparities? In the multivariate analysis, I address this issue using probit regressions.

### **Persistence in inequalities of frailty at older age: A comparison of nine EU countries**

*Louis Arnault (University of Bordeaux), Florence Jusot (University Paris-Dauphine), Nicolas Sirven (University Paris Descartes), Marie-Anne Brieu (ILC-France), Didier Halimi (ILC-France), Françoise Forette (ILC-France)*

This article explores the trend of social inequality in frailty with a focus on gender issues, using data from Waves 1, 2, 4, 5 and 6 of SHARE for Austria, France, Germany, Sweden, Denmark, Switzerland, Belgium, Italy and Spain. Fried's frailty phenotype is measured as a clinical syndrome in which three or more of the following criteria are observed: shrinking, self-reported exhaustion, weakness as measured by a low grip strength and slowness as measured by having difficulties walking 100 metres or climbing one flight of stairs without resting and low physical activity. An analysis based on a pseudo-panel perspective shows large and significant social inequalities in the prevalence of frailty between less and highly educated group in both men and women. Social inequalities tend to increase with age, differences between less and highly educated reaching 6.6 percentage points for men and 10.9 percentage points for women in the 75+ age class. The results are also stable over time, meaning that the new generations face a similar risk of frailty as did the previous generations. Despite many efforts made to date for reducing social inequalities in health, inequalities in frailty remain large, which suggests to implement new targeted preventive interventions.

### **Multimorbidity and quality of life: findings from the European SHARE database, wave 6**

*Tatjana Makovski (Luxembourg Institute of Health LIH; Maastricht University) Gwenaëlle Le Coroller (LIH), Polina Putrik (Maastricht University Medical Centre), Beatriz Poblador Plou (IACS), Maria Ruiz-Castell (LIH), Saverio Stranges (LIH, Western University), Laetitia Huiart (LIH), Maurice P Zeegers (Maastricht University), Marjan van den Akker (Maastricht University)*

Multimorbidity is commonly defined as co-existence of 2 or more chronic conditions and its prevalence increases with age. Decreasing quality of life (QoL) is one of its major consequences. Study aims to: 1. Assess whether factors of interest can explain better relationship between multimorbidity and QoL, 2. Identify most prevalent disease patterns and their relation to QoL, 3. Observe differences across Europe. We apply a cross-sectional analysis based on the population age 50+ of SHARE (wave 6, N=67,179). List of conditions comprised 17+ diseases. Control, Autonomy, Self-Realization and Pleasure questionnaire (CASP-12v) was used to evaluate QoL (rescaled 0-100). Multilevel mixed-effects linear regression (3 levels) was tested to assess the relationship between an increasing number of diseases and QoL. Confounders were age, sex, living alone, household income, employment and education. Factors of interest were symptoms, indicators of treatment burden and social network variables. Factor analysis served to identify disease patterns. Preliminary model adjusted for confounders showed that on average QoL decreases -2.49 (95%CI: -2.57, -2.41) with each added condition. Five disease patterns were found. Further analyses will clarify whether factors of interest explain better the relationship under question, which patterns impact QoL stronger and are there differences across Europe.

📅 **Day 2: Friday, 10.10 – 11.00**

**Room 138**

■■■ **B2: Work and retirement**

👤 **Chair: Sergio Perelman (University of Liège)**

### **Mothers' life course work and career choices and intergenerational ties at older age**

*Agnieszka Chłoń-Domińczak, Iga Magda, Paweł Strzelecki (Warsaw School of Economics)*

Older women in Europe had various strategies to reconcile work and family life – from working mainly full-time, through part-time work to choosing household work and withdrawing from labour market activities. These choices depended on their level of education, number of children as well as country of origin. In the paper we investigate to what extent choices regarding economic activity over the life course influence intergenerational ties at older age, including non-monetary and monetary transfers, grandchildren care and intensity of contacts with children. In the analysis, we use data from SHARE survey, including SHARELIFE module with individual labour market careers data as well as recent information on intergenerational transfers collected in 2018. We find out that reconciling both work and family life, by following a part-time labour market careers leads to stronger intergenerational exchanges, while those who withdrew from the labour market seem to have less intensive intergenerational exchanges. When we take into account individual characteristics, including the labour market career, national (welfare state) differences are also important.

### **Dynamic Changes in Determinants of Inequalities in Health in Europe with a Focus on Retirement**

*Jørgen T. Lauridsen, Terkel Christiansen, Astrid R. Vitved (University of Southern Denmark)*

Equity in health and health care is an important health policy objective in most European countries. Of particular interest are the contributions to socioeconomic inequality in health from being retired because retirees most often have lower income and lower health status relative to their working peers. The present paper contributes to the literature on the association between retirement and income-related health inequality by looking further into the contribution from three groups of retired individuals (younger than 65 years; 65–74 years; 75 years and older) to income-related inequalities in health with focus on the development in this contribution over time, based on SHARE wave 1 and 7. The results indicate that retirement status contributes to a varying degree to income-related inequality in health across European countries, and that the variation can be related to income inequality as well as health differences, depending on the country considered. Furthermore, it is indicated that the contribution from retirement status changes in different patterns across countries, as it drops for some and increases for other while being inconclusive for other.

**Program evaluation and causal inference for distributional and functional data: estimation of the effects of retirement on health outcomes**

*Andrej Srakar (Institute for Economic Research IER; University of Ljubljana), Valentina Prevolnik Rupel (IER), Tjaša Bartolj (IER)*

Statistical analysis of complex, i.e. non-standard data (compositions, intervals, histograms, distributions, functions, manifolds) is gaining ground. Despite many types of regressions existing for symbolic data, causal inference has not been studied so far. Furthermore, only slowly is it gaining ground using functional data. We develop statistical theory for instrumental variables with symbolic distributional data. We apply the findings to studying the effects of retirement on health outcomes. We use panel dataset of SHARE in Waves 1–6. To address reverse causality we use as instrument changes in retirement age. Novelty is that we treat countries as units and variables are aggregated over countries. In this manner, we estimate the effect of the distribution of retirement on distribution of health outcomes over countries (the instrumental variable is distributional as well). We extend the analysis to functional linear models. The novelties of the article are: program evaluation and causal inference has so far not been studied with distributional data; the method allows improved possibilities for program evaluation; we provide a rich estimation of causal effects of retirement on physical health outcomes. As SHARE includes data on different possible aggregations, complex data approaches seem natural for its analysis in future.

 **Day 2: Friday, 10.10 – 11.00**

**St Kristóf hall**

 **B3: Intergenerational transfers**

 **Chair: Arne Bethmann (Max Planck Institute for Social Law and Social Policy)**

**Social inequalities in support patterns between multiple generations in Europe over time**

*Martina Brandt (TU Dortmund University), Christian Deindl (Heinrich Heine University Dusseldorf), Nekehia T. Quashie (TU Dortmund University)*

Family members support each other across the entire family cycle. Parents help their adult children with financial, instrumental, and childcare support, while children in midlife often provide practical help and care to their older parents. However, profound social inequalities in familial care linked to different need and opportunity structures as well as public transfers within different contexts are suspected. While there is some research on each aspect separately, and some research on the connections between certain transfer types at certain family stages, there is still no conclusive study combining different support types between multiple generations from different social backgrounds over time. In our view, adopting a longitudinal multigenerational perspective is essential to capture dependencies and negotiations within families from different socio-economic backgrounds within different regional contexts. Using six waves of the Survey of Health, Ageing and Retirement in Europe (SHARE), we examine intergenerational transfers between multiple generations over time across European regions, considering mid-aged Europeans in the “sandwich” position between older parents and children and include multiple transfer directions and types over time to assess the links between social inequality, changes on the family and country level, and intergenerational solidarity in Europe’s ageing societies.

## **Inheritances and Gifts in European Families: Between Expectations and Reality Over Time**

*Ronny König, Bettina Isengard, Marc Szydlik (University of Zurich)*

Previous research on monetary transfer patterns within families and between generations has shown that family generations are strongly connected with one another. However, while previous research has mainly focused on the consequences of intergenerational solidarity for social inequality, there is a lack of research on the role of private transfers as part of intergenerational solidarity and cohesion. The paper addresses this research gap and examines the determinants of intergenerational cash flows – especially inheritances – in the context of social inequality by analyzing the relevance of expecting and receiving inheritances from a transnational and time-related perspective. The analyses are based on a two-time panel design of the first (2004/5) respectively second (2006/7) and sixth (2015) respectively seventh wave (2017) of the Survey of Health, Ageing and Retirement in Europe (SHARE). Our findings prove that larger gifts and inheritances are an important feature of intergenerational support. However, the situation varies widely across countries, both for expecting and receiving inheritances. Moreover, our multivariate multilevel analyses also offer evidence of class-specific patterns for expecting and receiving such assets and thus highlight the perpetuation of social inequalities over generations.

## **Children's union status and contact with mothers: is the relationship causal?**

*Martin Kreidl, Zuzana Žilinčíková, Masaryk University*

Intergenerational contact and exchange are important sources of support for both adult children as well as their parents. Recent research based on child-parent dyads indicates that adult children living in cohabitations interact with their mothers less often than children living in marriage. This finding is based both on within- and between-family comparisons. Some scholars use a causal argument to explain this association: it should be the lower institutionalization and social recognition of unmarried cohabitations that produce this effect. We find this interpretation to be dubious for issues related to unobserved heterogeneity and revisit the issue. We use within-family sibling comparisons to control for unmeasured parental characteristics. We explore if differences in marital status between siblings are associated with differences in contact. We find out that only a small fraction of the differences between married and cohabiting children persist even in fixed-effect models. Thus, we conclude that the effect of union status on intergenerational contact can be interpreted causally only to a very limited extent.

📅 **Day 2: Friday, 11.30 – 12.30**

**Conference hall**

📄 **Plenary session IV: Cognition and Care**

👤 **Chair: Annette Scherpenzeel (Max Planck Institute for Social Law and Social Policy)**

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### **Pathways from Social Activities to Cognitive Functioning**

*Ella Schwartz (Israel Gerontological Data Center; Hebrew University of Jerusalem)*

One of the greatest challenges of old age is the risk of cognitive decline. Engagement in social leisure activities has been identified as a possible protective factor. However, it is not yet clear what are the mechanisms underlying this association. The current study aims to elucidate the pathways through which social activities can impact cognitive functioning, focusing on physical activity and mental health as possible mediators. The study utilized three waves of data – the fourth, fifth and sixth waves of SHARE, collected in 2011, 2013 and 2015, respectively. It focused on respondents aged 65 and older. Cognitive functioning was assessed via immediate recall, delayed recall and fluency. Social leisure activities were measured using the frequency of volunteering and of attending social clubs. Data were analyzed using a structural equation modeling (SEM) approach. The results indicated a significant direct effect of social leisure activities on cognitive functioning. That is, being socially active at baseline was related to better cognitive function four years later. The results also indicated the existence of indirect effects. Engaging in social leisure was related to better mental health and more physical activities two years later, which were related to better subsequent cognitive performance.

### **Childhood poverty and cognitive trajectory among older Europeans**

*Gindo Tampubolon (Manchester Institute for Collaborative Research on Ageing)*

Childhood condition has a long reach into old age, shaping experience of healthy ageing. But evidence on the effect of childhood poverty or childhood advantage on cognitive trajectory in old age is contradictory. While the childhood advantaged are known to have better cognition in old age, their cognitive decline is steeper, claimed a recent study. Thus the two groups' trajectories converge in old age. This study aimed to clarify the relations of childhood poverty to cognitive trajectories. Data were drawn from SHARE wave 7, making use of the life history module which furnished childhood information (N = 71632, female 56%). The outcome was total cognitive score; exposure was a binary childhood poverty. To address recall error, childhood poverty was constructed as a latent class. To address possible bias from selective attrition, joint models of survival and linear mixed models were applied. The childhood poor older females had significantly lower levels of cognition throughout their old age; similar to males'. Contradicting the recent claim, the trajectories of the poor and the advantaged did not materially converged. Unless of course at the point of death when we all converged.

## **Do gender employment gaps affect the caregiving to older individuals?**

### **Evidence from European Countries**

*Eric Bonsang (University Paris-Dauphine), Joan Costa-Font (London School of Economics)*

Gender differences in the supply of long-term care are not fully understood. This paper investigates to which extent the gender employment gap among adult children across European countries explains the cross-country differences in the involvement of daughters in caregiving and the use of formal care among older parents. Taking advantage of unique European data spanning for more than a decade, we estimate the heterogeneous effect of the gender composition of the children on the use of informal and formal care of older parents (65+) according to variations in the aggregate gender employment gap (at the country and year level). While previous literature finds that daughters are more likely to provide care, we show that this effect varies across country and over time. The heterogeneity is highly associated with the aggregate gender employment gap: the wider the gap, the larger the effect of gender composition of children on informal care. We also show that this effect explains the use of formal care: older individuals with daughters are less likely to use formal care, especially paid domestic help, but only when the gender employment gap is larger.



## 5. ABOUT THE ORGANIZERS

SHARE, the Survey of Health, Ageing and Retirement in Europe, seeks to analyse the process of population ageing in depth. It is the first study to examine the different ways in which people aged 50 and older live in 27 European countries and Israel. Its scientific potential lies in the extensive data gathered from more than 140,000 individuals (approximately 380,000 interviews) all across Europe, covering the interplay between economic, health and social factors in shaping older people's living conditions. SHARE findings have a strong socio-economic impact as they support evidence-based policies on the national as well as on the European and international level.

The Hungarian State Treasury is a central budget agency with an individual operation and financial management, with an executive power, forming an independent legal entity with a national scope of competence, standing under the direction of the Minister of Finance concerning both the functional and the regulatory aspects. The Hungarian State Treasury was founded on the 1<sup>st</sup> of January 1996. The central office and 19 country directorates are carrying out their tasks since the 1<sup>st</sup> of January 2012. The mission of the Hungarian State Treasury is the disbursement of public funds and the control of these payments, which means that the Treasury is a supervisor of the process as well.

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