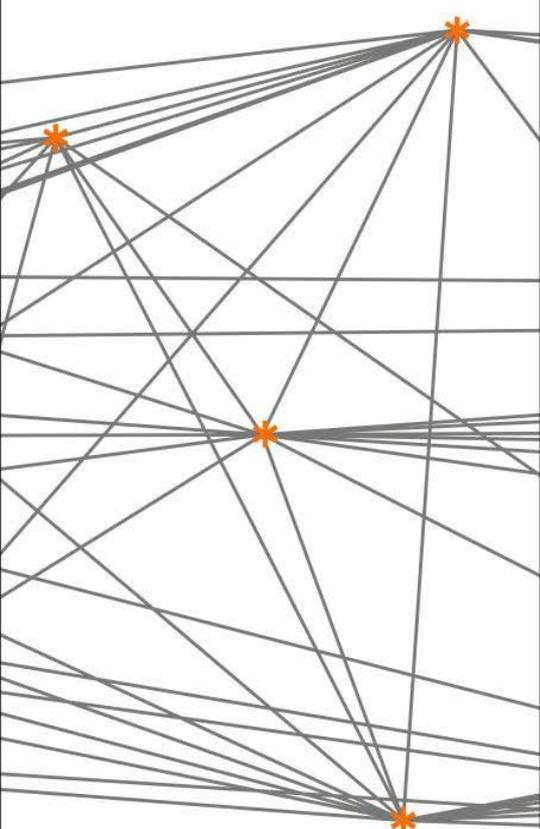




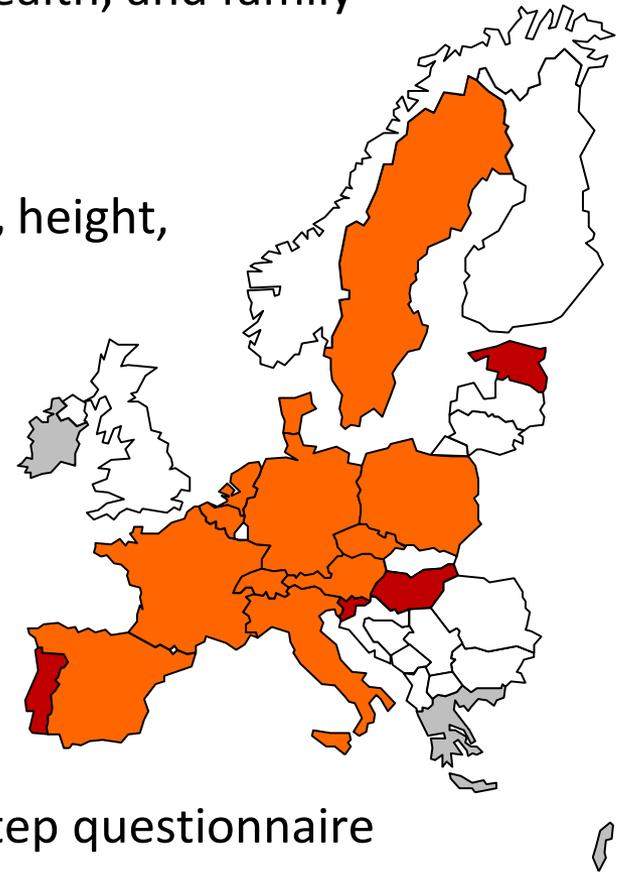
Introduction to SHARE Wave 4

Martina Brandt



In a nutshell

- ▶ > 60.000 respondents from 16 countries (new: EE, HU, PT, SI)
- ▶ Regular panel questionnaire on economics, health, and family
- ▶ **New social network module**
- ▶ ... and pilot projects (DE)
 - ▶ Additional biomarkers: **dried blood spots**, height, waist circumference, blood pressure
 - ▶ Interviewer survey
 - ▶ Attitudes, interview expectations
 - ▶ Linkage to administrative pension data
 - ▶ Validation, additional information, reduce respondent burden
 - ▶ Nonresponse experiment
 - ▶ Monetary incentives, training, door step questionnaire



- ▶ The first harmonized cross national SN database ever
- ▶ Who are the most important people in your life?

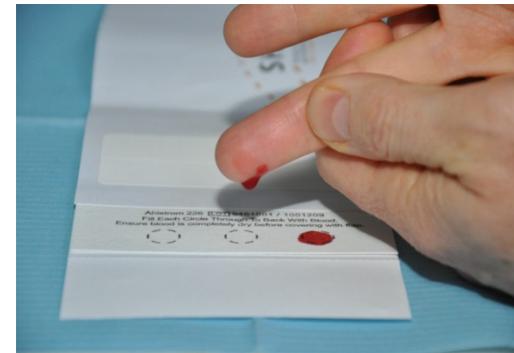


From time to time, most people discuss things that are important to them with others [...]. Who are the people with whom you discussed things that were important to you?

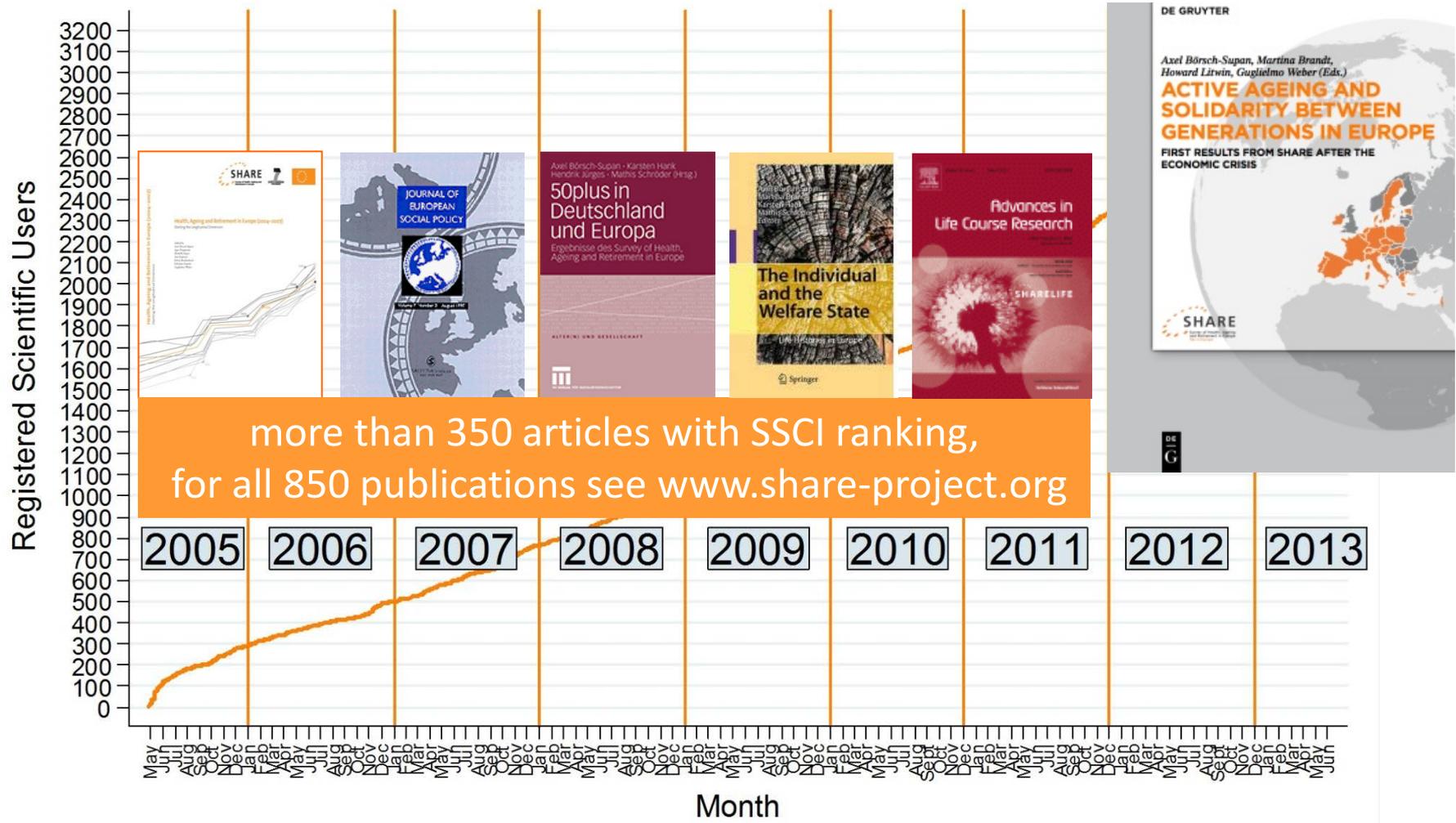
- ▶ Role relations, network composition, living distance, contact frequency, support exchange, satisfaction with network...
- ▶ Social ties are an important resource for individuals and societies!
 - ▶ Support, self-esteem, health behaviours ...
 - ▶ Social cohesion, solidarity

- ▶ New biomarkers: dried bloodspots
 - ▶ Cholesterol, CRP / Vitamin D:
Risk of cardiovascular diseases / fractures
(pre-disease information)
 - ▶ HbA1c: diabetes

- ▶ Why health measurements?
 - ▶ Better identify health status
 - ▶ Assess differences between subjective & objective health, e.g. due to
 - ▶ response behaviours
 - ▶ or health knowledge
 - ▶ and identify causal relationships (life style, environment, health care...)
 - ▶ Important for health policy design



Data use and publications



The new book: overview results

- ▶ **Europe is still divided in many respects**
 - ▶ Less wealth and more poverty in the South and East
 - ▶ Poorer health in the South and East
 - ▶ Diverse social networks in the North and West, family networks in the South and East

Economics: financial distress

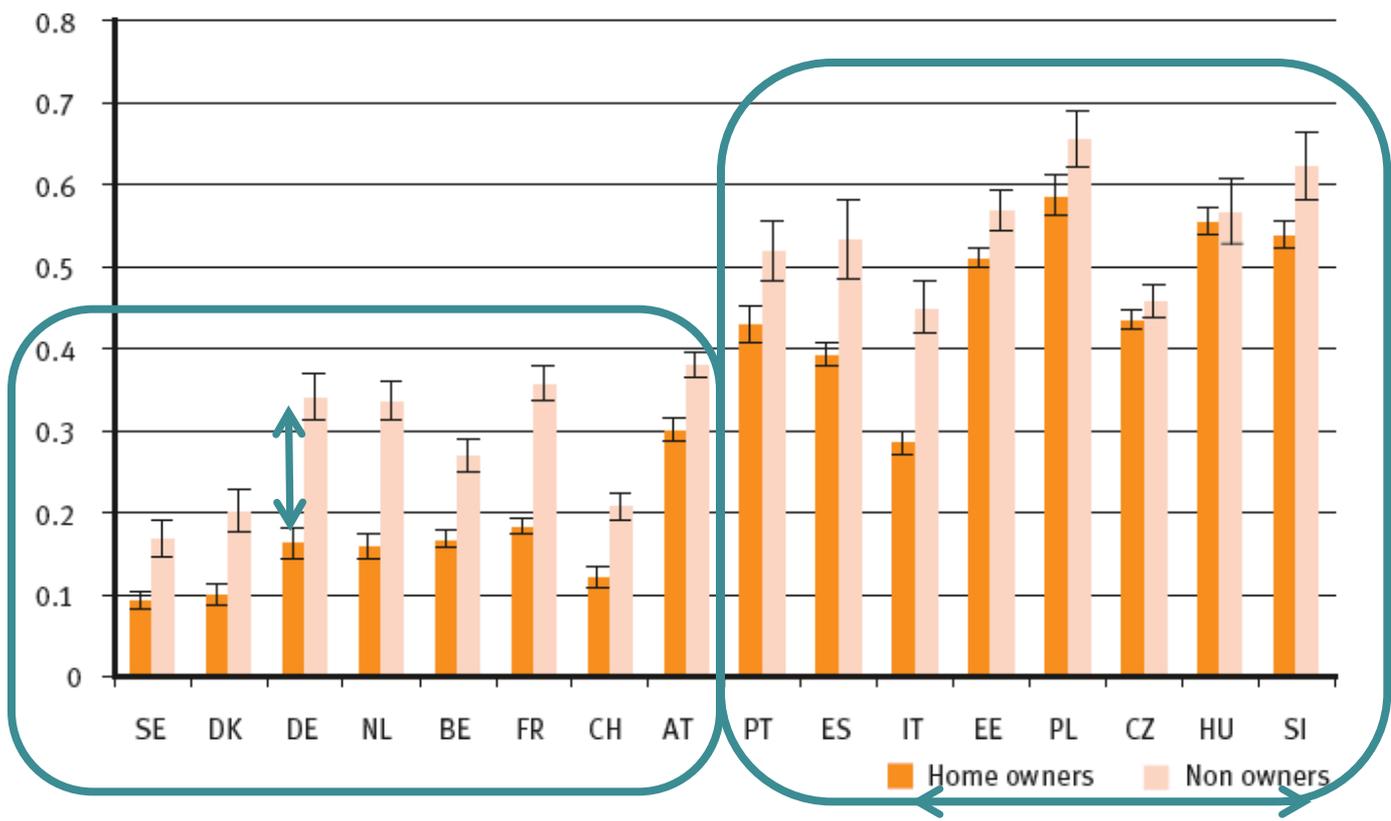


Figure 3.3: Fraction of households in financial distress
 Notes: 21,102 observations
 Source: SHARE Wave 4 release 1

Cavasso, Weber

Health: poor self-rated health

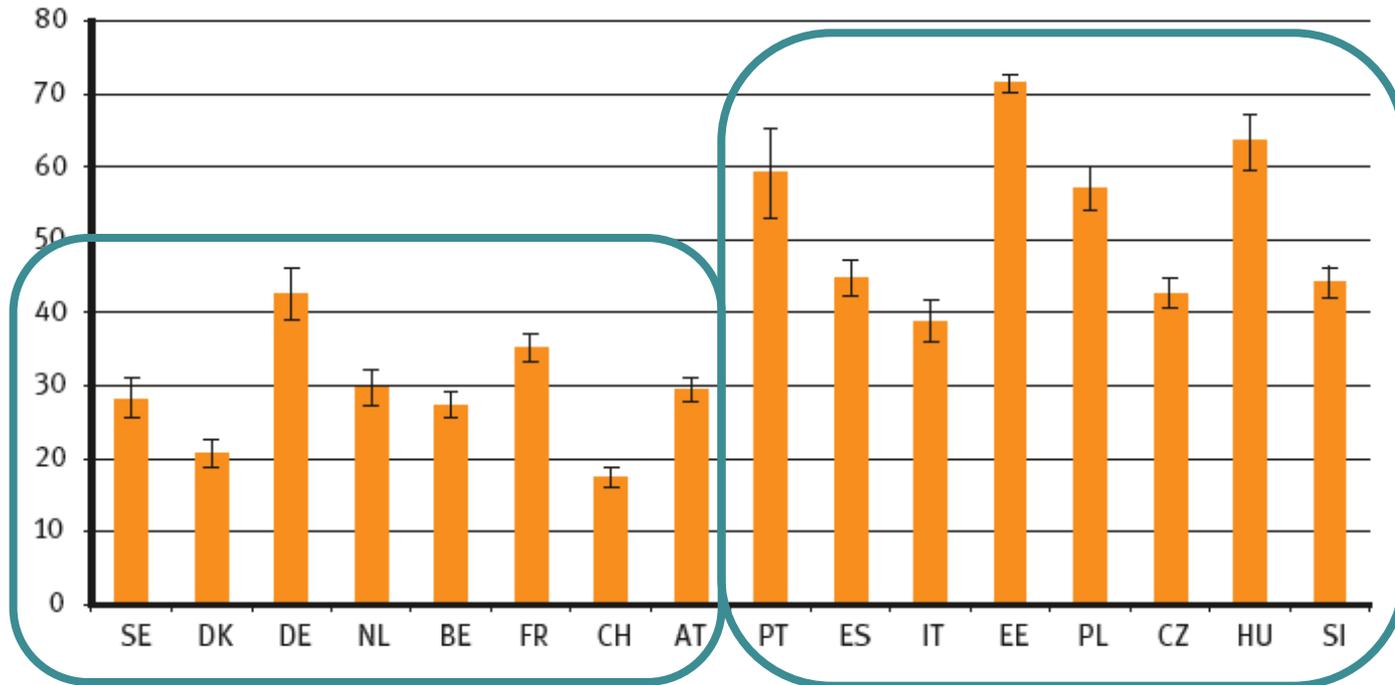


Figure 13.1: Cross-national prevalence proportions (y-axis; per cent) of respondents reporting poor self-perceived health (N=53,213)

Notes: Whiskers represent confidence intervals (CI). Adjusted by age and gender.

Source: SHARE Wave 4 release 1, using calibrated individual weight

Lindholm-Eriksen, Vestergaard, Andersen-Ranberg

Social networks: composition

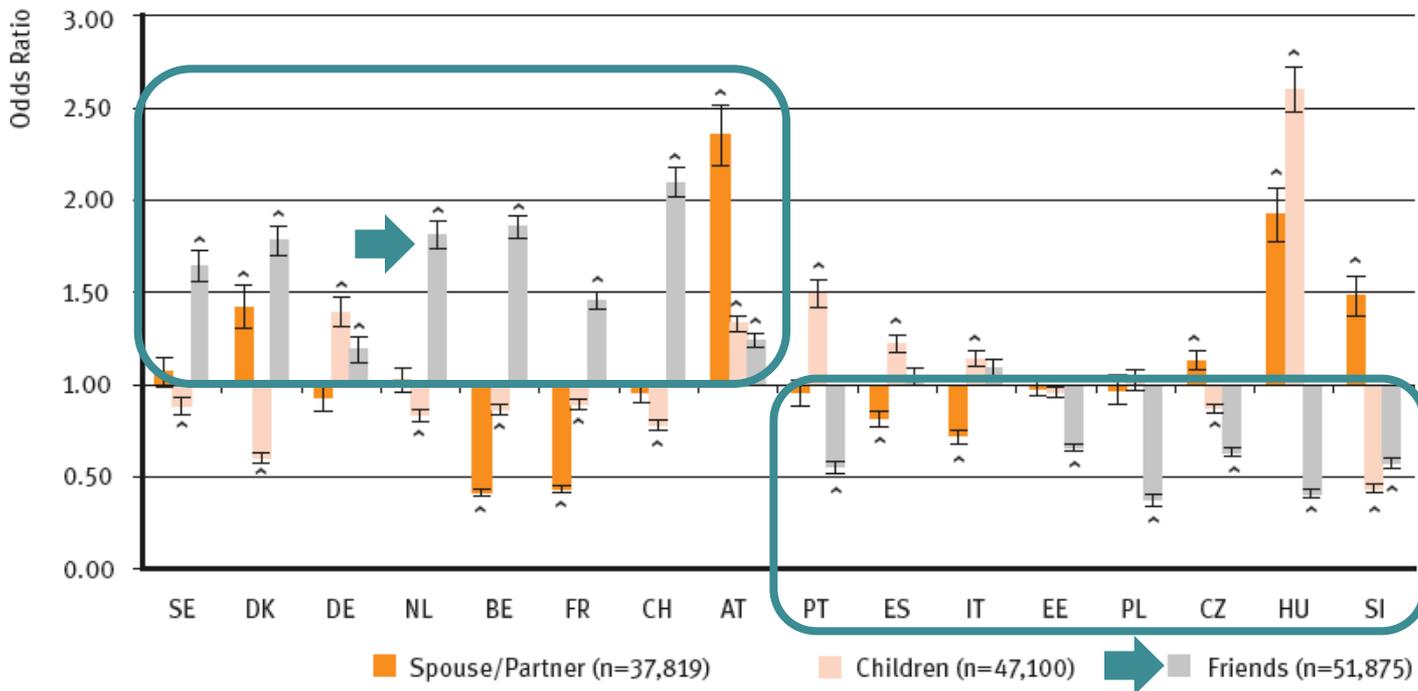


Figure 24.3: Country differences in the selection of spouse/partner, children and friends within named personal social networks

Notes: ^ denotes statistical significance of .05 or less; models are adjusted for age, gender, education, marital status, living siblings, grandchildren, activities of daily living (ADL), instrumental activities of daily living (IADL) and mobility limitations.

Source: SHARE Wave 4 release 1

Stoeckel, Litwin

Changes over time

▶ **The crisis hit frail people most**

- ▶ It was associated with less retirement & a higher liquidation of assets
- ▶ Individuals with low education, low income, poor health and single females particularly affected
- ▶ The crisis had negative effects on health, especially in areas with rising unemployment

▶ **Social networks are an important buffer**

- ▶ 50+ Europeans continue to be 'givers' rather than 'receivers' of support
- ▶ Participation in social activities leads to a reduction of depression
- ▶ Active & healthy ageing associated with a country's social cohesion

Some more details next

- ▶ **The crisis: income, wealth and consumption**
edited by Guglielmo Weber
 - ▶ Maja Adena, Michał Myck: Poverty and transitions in key areas of quality of life
- ▶ **Work and retirement: challenges at the end of working life**
edited by Axel Börsch-Supan
 - ▶ János Divényi, Gábor Kézdi: Low employment among the 50+ population in Hungary: the role of incentives, health and cognitive capacities

Some more details next

- ▶ **Active and healthy ageing**

edited by Martina Brandt

- ▶ Tabea Bucher-Koenen, Fabrizio Mazzonna: The recent economic crisis and old-age health in Europe

- ▶ **Social embeddedness and intergenerational solidarity across the life course**

edited by Howard Litwin

- ▶ Agar Brugiavini, Raluca Elena Buia, Giacomo Pasini, Francesca Zantomio: Long-term care and reciprocity: does helping with grandchildren result in the receipt of more help at older ages?



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

- ▶ www.share-project.org
- ▶ Open access book
- ▶ Data, questionnaires, documentation, summary results as well as all publications
- ▶ You can sign up for the biannual newsletter to stay updated
- ▶ ...or just “like” and follow us @SHARE_MEA
- ▶ THANK YOU for being here and supporting us!

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SHARE - Survey of Health, Ageing and Retirement in Europe

The Survey of Health, Ageing and Retirement in Europe (SHARE) is a multidisciplinary and cross-national panel database of micro data on health, socio-economic status and social and family networks of more than 85,000 individuals (approximately 150,000 interviews) from 19 European countries (+Israel) aged 50 or over.

The data are available to the entire research community free of charge. For a summary overview of SHARE, you can download the [SHARE brochure](#).



SHARE responds to a Communication by the European Commission calling to "examine the possibility of establishing, in co-operation with Member States, a European Longitudinal Ageing Survey". SHARE has become a major pillar of the European Research Area, selected as one of the projects to be implemented in the European Strategy Forum on Research Infrastructures (ESFRI) in 2008 and given a new legal status as the first ever European Research Infrastructure Consortium (SHARE-ERIC) in March 2011.

SHARE is centrally coordinated by Axel Börsch-Supan, Ph.D. at the [Munich Center for the Economics of Aging \(MEA\)](#), [Max Planck Institute for Social Law and Social Policy](#). It is harmonized with the [U.S. Health and Retirement Study \(HRS\)](#) and the [English Longitudinal Study of Ageing \(ELSA\)](#) and has become a role model for several ageing surveys worldwide. SHARE's scientific power is based on its panel design that grasps the dynamic character of the ageing process. SHARE's multi-disciplinary approach delivers the full picture of the ageing process. Rigorous procedural guidelines and programs ensure an ex-ante harmonized cross-national design.

We gratefully acknowledge funding (for an overview click [here](#)) from the [European Commission \(M4\)](#), the [US National Institute on Aging](#), and national sources, especially the [German Federal Ministry of Education and Research](#).

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The Swiss country team of SHARE at IMES and FORS is organizing a workshop about the role of...

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The official data and book publication will be celebrated June 27, 2013 (10:00-17:00) at the...

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