Growing Older in America

For more than 20 years, creating a public resource of data on aging in America

UNIVERSITY OF MICHIGAN

HRS HEALTH AND RETIREMENT STUDY
A Longitudinal Study of Health, Retirement, and Aging
Sponsored by the National Institute on Aging

"The Health and Retirement Study is the nation's leading resource for data on the health and economic circumstances of Americans age 51 and older. I would like to thank the National Institutes of Health for its vision in supporting and conducting research on aging and on the selection of Michigan as the home base for this critical national study."

—U.S. Representative John Dingell (D-Michigan)

The University of Michigan Health and Retirement Study is a longitudinal survey of a representative sample of Americans over the age of 50. Supported by the National Institute on Aging (part of the National Institutes of Health) and the Social Security Administration, HRS is designed to provide reliable data on the decisions, choices, and behaviors of people as they age and respond to changes in public policy, the economy, and health.

Need

Demographers have long anticipated the rapid aging of the population as the large Baby Boom generation reaches retirement. By 2030, when the last of the Boomers turns 65, the population over age 65 will nearly double. This dramatic change in our population means that there will be more retirees drawing benefits and fewer workers to help pay for programs like Social Security and Medicare, and more elderly parents with fewer children to help care for them. Good policy at the population level goes hand in hand with better science for understanding aging at the individual level. Anticipating these trends, the National Institute on Aging (NIA) and the research community worked together to define the need for reliable data about aging that could help researchers and policymakers address these challenges.

Fulfillment

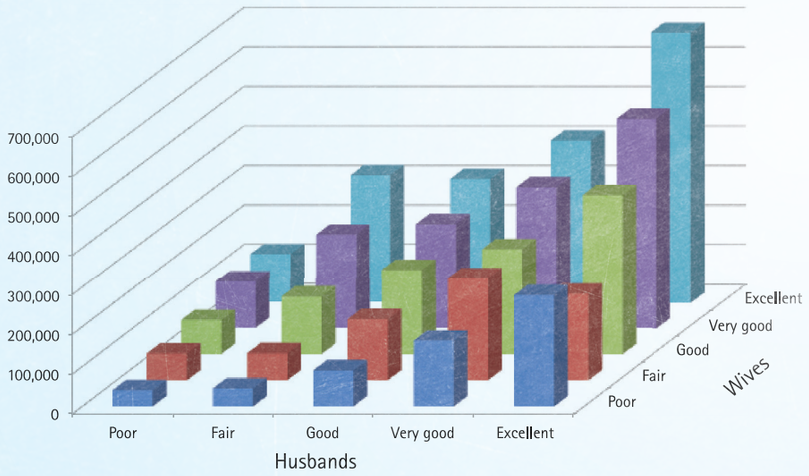
In 1990, an act of Congress directed the NIA to create a new study. The Institute for Social Research at the University of Michigan was selected in scientific peer review to conduct the new Health and Retirement Study (HRS). The HRS launched data collection in 1992 and has re-interviewed the original sample of respondents every two years since then. By adding new cohorts and refreshing the sample, the HRS has grown to become the largest—with a current sample of over 26,000—and most representative longitudinal panel study of Americans over the age of 50. Through expanding its science into new areas of biology and psychology, it has become the most comprehensive study for understanding the lives of aging Americans.

Building the Foundation

HRS began with a uniquely multi-disciplinary approach focused on four broad topic areas—income and wealth, health and use of health services, work and retirement, and family connections—which remain at the study's core. This blend of economic, health, and social variables provides unprecedented potential to study increasingly complex questions about aging and retirement.

For consenting respondents, HRS data is linked at the individual level to administrative records from Social Security and Medicare claims, providing a wealth of detail beyond what surveys can achieve.

Median Wealth of Households, by Health Status of Husbands and Wives



Income and Wealth

Detailed characterizations of income and wealth over time are hallmarks of the HRS. Personal information like this can be difficult to obtain, but HRS's innovative data collection methods have overcome many traditional survey obstacles and continue to yield in-depth and reliable measures.

Health and Use of Health Services

The HRS takes a multidimensional approach to health—studying the course of chronic diseases and the evolution of functional capacities. A signature feature of HRS is the direct assessment of cognitive abilities and how they change with age. Health insurance and the use of medical care are important for understanding health and the connections among health, employment, and economic resources.

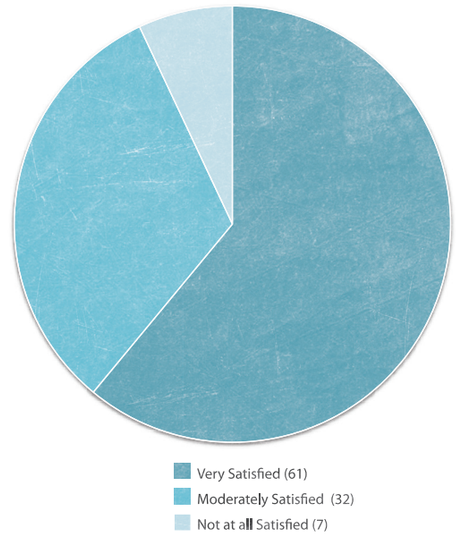
Employment

For many people, retirement is anything but a simple one-step transition from full-time work to no work at all. The HRS tracks all the different ways people retire and "un-retire" and can relate these choices to their health, type of work, pension and health insurance coverage, and family situation. That's the type of data needed to model the potential effects of new policies to encourage people to work longer.

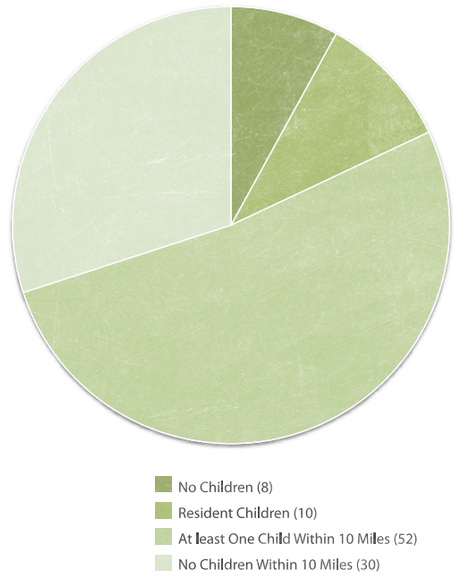
Family Connections

Family background shapes health and economic outcomes throughout life. Family members provide economic and emotional support and often provide physical care for each other. Understanding these connections and how they change with age has been a central concern behind the design of HRS from its beginning.

Level of Satisfaction with Retirement



Proximity to Children



Integrating Biology

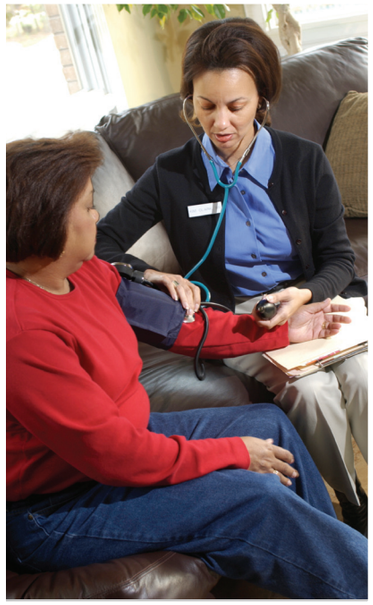
For years, the HRS recognized the value of integrating direct measures of health and basic biology, but, as a large national population-based study, it was not feasible to bring everyone into clinics or hospitals. The solution was to exploit and, in some cases, develop new technologies of biological measurement that could be conducted in the home. In 2006, the HRS introduced a new "enhanced" in-person interview that collected a wide range of measures of physical function, fingerstick blood spots for blood-based biomarkers, and DNA samples. Integrating biology in this way puts HRS at the forefront of biosocial surveys of aging.

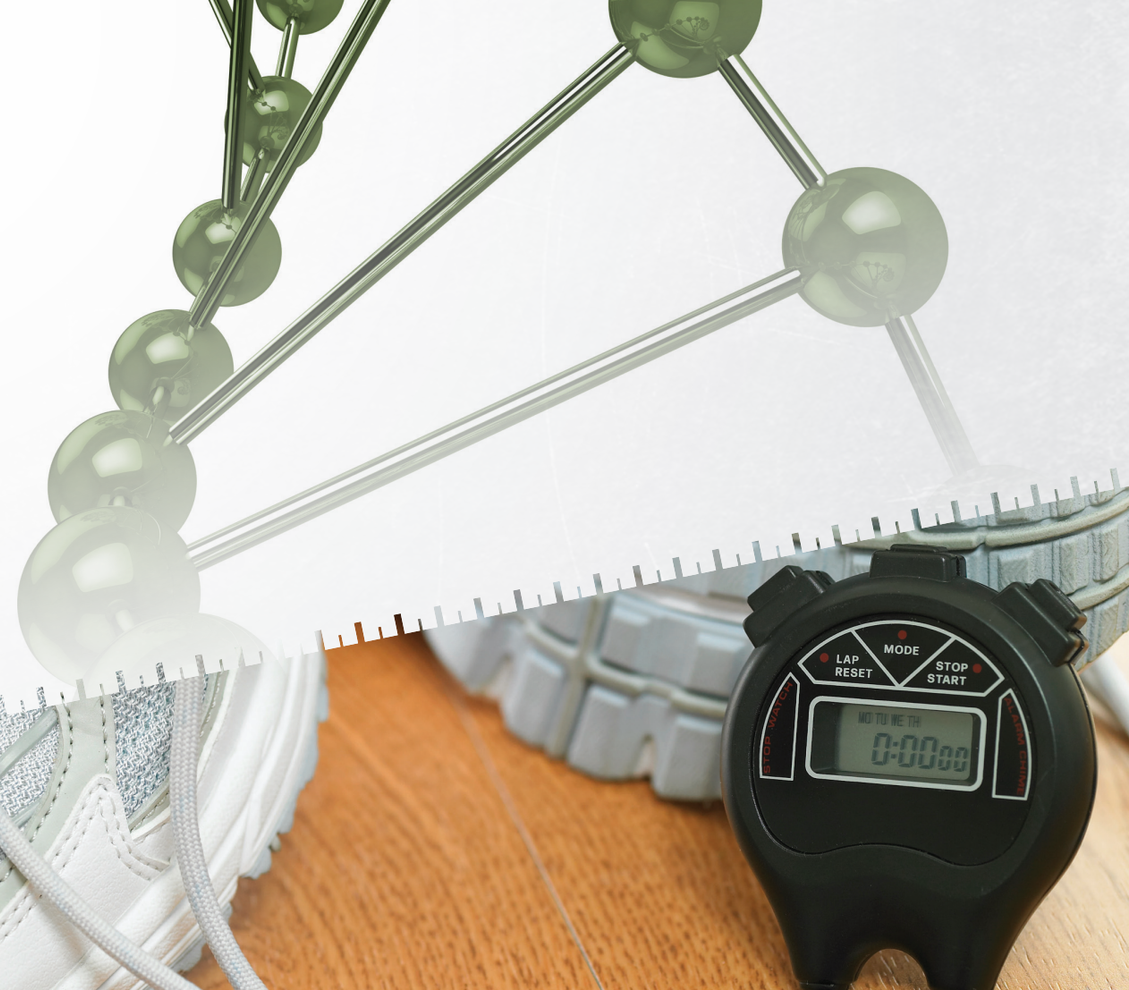
"These new biomarkers position HRS at the cutting edge of an emergent biosocial approach to survey research."

—Thomas McDade, Northwestern University

Collecting Genetic Information

When the HRS began collecting DNA in 2006, it was with a firm belief that measuring genetic variation at the population level would someday help to galvanize the integration of social and biological sciences but with no clear plan for how to do that given the high cost of genetic analysis. The rapid technological advances in genotyping, and the infusion of research funds into the NIH under the American Recovery and Reinvestment Act created the opportunity for HRS to compete for the necessary support. The collaboration of leading geneticists at the University of Michigan made that effort a success. In March 2012, the HRS genetic resource was established with an initial sample of 12,500 people measured on 2.5 million single nucleotide polymorphisms (SNPs), with 6,000 people to be added in the near future. The HRS is partnering with Nobel Prize Winner Elizabeth Blackburn to pioneer new measures of telomere length from salivary DNA.





Going Global

Aging is a global phenomenon affecting developed and less developed nations alike. Because of its innovation and importance, the HRS has become the model and hub for a growing network of harmonized longitudinal aging studies around the world—including England, Ireland, 20 European Union countries, Israel, Mexico, China, Japan, South Korea, and India. The global network greatly enhances the value of each of its members, including the HRS itself, through opportunities for comparative research and sharing of ideas and methods.

Collaboration

The new international studies have attracted researchers from a variety of disciplines and all parts of the globe. Interaction of national study teams with counterparts in other countries has, in barely a decade, created a new and vibrant international research network. HRS leaders and researchers have provided extensive consultation through the many phases of study planning, design, and implementation. And faculty and staff from the University of Michigan have provided crucial start-up assistance and training for many of these studies. Dynamism in the new studies has benefited the HRS in a number of ways, including the development of new instruments and ways of thinking.

Comparative Research

The availability of comparable cross-national data presents opportunities for new research, such as comparing the impact of different national policies on the health and work patterns of older populations. Comparisons also point up areas for policy to address. For example, research examining the health of the U.S. and English populations showed that Americans in middle age are much less healthy than their English counterparts (Banks et al., JAMA 2006).

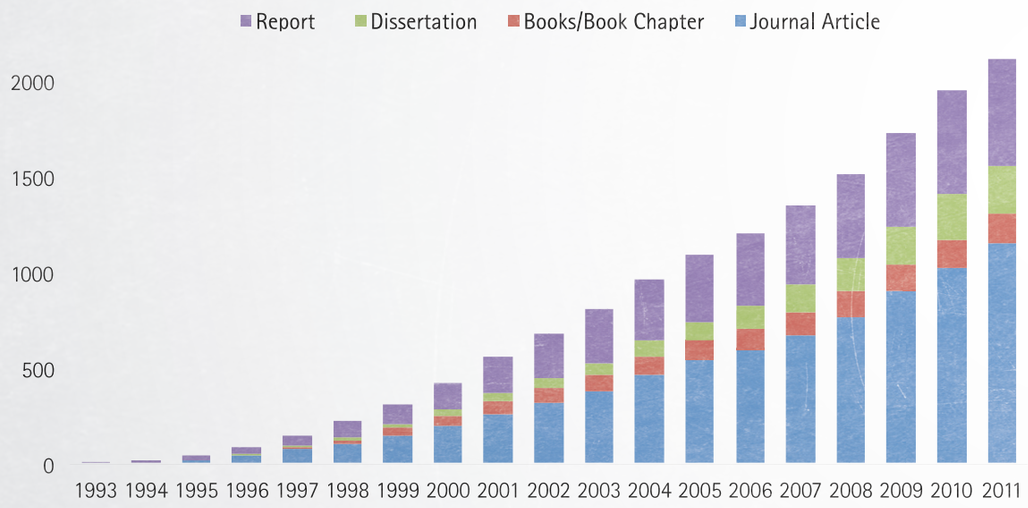
"The growing HRS enterprise in other countries now covers more than half the world's population."

—James P. Smith, RAND Corporation

Access and Impact

HRS has always been committed to early and open access to data while protecting the confidentiality of respondents. Support for using this large and complex data set is available through the HRS website, and user workshops are conducted throughout the year. Data dissemination and user outreach efforts have paid off with 14,700 registered researchers worldwide and a rapidly growing number of publications using HRS data.

HRS Scientific Productivity



Acknowledgements

HRS is grateful to the National Institute on Aging of the National Institutes of Health for primary support of this project (U01 AG009740) and to the Social Security Administration for substantial co-funding.

HRS Co-Investigator Team

- **David R. Weir, Ph.D.**, Director, University of Michigan
- **Kenneth M. Langa, M.D., Ph.D.**, Associate Director, University of Michigan
- **Mary Beth Ofstedal, Ph.D.**, Associate Director, University of Michigan
- **Charles C. Brown, Ph.D.**, University of Michigan
- **Eileen M. Crimmins, Ph.D.**, University of Southern California
- **Michael D. Hurd, Ph.D.**, RAND
- **Sharon L.R. Kardia, Ph.D.**, University of Michigan
- **Helen G. Levy, Ph.D.**, University of Michigan
- **John J. McArdle, Ph.D.**, University of Southern California
- **Kathleen M. McGarry, Ph.D.**, University of California, Los Angeles
- **Olivia S. Mitchell, Ph.D.**, University of Pennsylvania
- **Jacqui Smith, Ph.D.**, University of Michigan
- **Robert B. Wallace, M.D.**, University of Iowa
- **Robert J. Willis, Ph.D.**, Past Director, University of Michigan

NIA Program Officials

- **Richard M. Suzman, Ph.D.**, Director, Division of Behavioral and Social Research
- **John Phillips, Ph.D.**, HRS Science Officer, Division of Behavioral and Social Research
- **Georgeanne Patmios**, HRS Program Officer, Division of Behavioral and Social Research

Contact Information

Health and Retirement Study
Survey Research Center
Institute for Social Research
University of Michigan
426 Thompson Street
Ann Arbor, MI 48104
Phone: 734 936-0314
Fax: 734 647-1186
Website: hrsonline.isr.umich.edu
E-mail: hrsquest@isr.umich.edu

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Fax: 734 647-1186
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E-mail: hrsquest@isr.umich.edu