This PDF is a selection from a published volume from the National Bureau of Economic Research

Volume Title: Developments in the Economics of Aging

Volume Author/Editor: David A. Wise, editor

Volume Publisher: University of Chicago Press

Volume ISBN: 0-226-90335-4

Volume URL: http://www.nber.org/books/wise09-1

Conference Date: May 2005

Publication Date: March 2009

Chapter Title: List of contributors, indexes Chapter Authors:

Chapter URL: https://www.nber.org/books-and-chapters/developmentseconomics-aging/list-contributors-indexes

Chapter pages in book: (407 - 420)

## Contributors

James Banks Department of Economics University College London Gower Street London WC1E 6BT England

Jay Bhattacharya 117 Encina Commons Center for Primary Care and Outcomes Research Stanford University Stanford, CA 94305-6019

Axel Börsch-Supan Mannheim Research Institute for the Economics of Aging University of Mannheim Building L13, 17 D-68131 Mannheim Germany

Anne Case Woodrow Wilson School 367 Wallace Hall Princeton University Princeton, NJ 08544-1022

Amitabh Chandra John F. Kennedy School of Government Harvard University 79 JFK Street Cambridge MA 02138 James J. Choi Yale School of Management 135 Prospect Street P.O. Box 208200 New Haven, CT 06520-8200

Courtney Coile Department of Economics Wellesley College 106 Central Street Wellesley, MA 02481

David M. Cutler Department of Economics Harvard University 1875 Cambridge Street Cambridge, MA 02138

Angus Deaton Woodrow Wilson School 328 Wallace Hall Princeton University Princeton, NJ 08544-1013

Alan M. Garber Center for Primary Care and Outcomes Research/Center for Health Policy (PCOR/CHP) Stanford University 117 Encina Commons Stanford, CA 94305-6019 Edward L. Glaeser Department of Economics 315A Littauer Center Harvard University Cambridge, MA 02138

Michael D. Hurd RAND Corporation 1776 Main Street Santa Monica, CA 90407

Hendrik Jürges Mannheim Research Institute for the Economics of Aging University of Mannheim Building L13, 17 D-68131 Mannheim, Germany

Mun-Sim Lai Business and Public Administration California State University 9001 Stockdale Highway Bakersfield, CA 93311

David Laibson Department of Economics Littauer M-14 Harvard University Cambridge, MA 02138

Mary Beth Landrum Department of Health Care Policy Harvard Medical School 180 Longwood Avenue Boston, MA 02115

Ronald Lee Departments of Demography and Economics University of California, Berkeley 2232 Piedmont Avenue Berkeley, CA 94720

Thomas MaCurdy Department of Economics Stanford University Stanford, CA 94305-6072 Brigitte C. Madrian John F. Kennedy School of Government Harvard University 79 JFK Street Cambridge, MA 02138

Michael Marmot Dept of Epidemiology and Public Health University College London Gower Street London WC1E 6BT England

Andrew Mason Department of Economics University of Hawaii at Manoa Room 543, Saunders Hall 2424 Maile Way Honolulu, HI 96822

Tim Miller Department of Demography University of California, Berkeley 2232 Piedmont Avenue # 2120 Berkeley, CA 94720-2120

Zoe Oldfield Institute for Fiscal Studies 7 Ridgmount Street London WC1E 7AE England

James M. Poterba Department of Economics MIT, E52-373A 50 Memorial Drive Cambridge, MA 02142-1347

Joshua Rauh Graduate School of Business University of Chicago 5807 South Woodlawn Avenue Chicago, IL 60637

Monika Reti RAND Corporation 1776 Main Street Santa Monica, CA 90407 Susann Rohwedder RAND Corporation 1776 Main Street Santa Monica, CA 90407

Andrew Samwick 6106 Rockefeller Hall Department of Economics Dartmouth College Hanover, NH 03755-3514

Jonathan Skinner Department of Economics 6106 Rockefeller Hall Dartmouth College Hanover, NH 03755

James P. Smith RAND Corporation 1776 Main Street Santa Monica, CA 90407

Kate A. Stewart Mathematica Policy Research, Inc. 600 Maryland Ave, SW, Suite 550 Washington, DC 20024-2512 An-Chi Tung Institute of Economics Academia Sinica Taipei 11529, Taiwan

Steven F. Venti Department of Economics 6106 Rockefeller Center Dartmouth College Hanover, NH 03755

Robert J. Willis Survey Research Center University of Michigan 3048 ISR Building PO Box 1248 Ann Arbor, MI 48106

David A. Wise John F. Kennedy School of Government Harvard University 79 John F. Kennedy Street Cambridge, MA 02138-5398

## **Author Index**

Adler, Nancy E., 203 Altonji, J. G., 91 Ameriks, John, 18 Attanasio, Orazio, 54, 91 Auerbach, A. J., 91 Autor, D., 201 Baarsma, B. E., 188 Baicker, K., 352 Baltagi, Badi H., 264 Banerjee, Abhijit, 323 Banks, James, 11, 356, 359, 370, 402, 404 Barker, David J. P., 203, 355 Barro, R. J., 93 Becker, Gary S., 93, 264, 318 Berkel, B., 174, 180 Bhattacharya, Jay, 9, 284, 285, 288n3, 291, 312, 313, 315 Bloom, D. E., 92 Bodie, Zvi, 18 Börsch-Supan, Axel, 6, 174, 174n1, 179, 180 Bound, J., 175 Bourguignon, F., 91 Brown, J. R., 91, 104 Browning, Martin, 54 Caballero, B., 354, 355 Calle, E. E., 353 Campbell, John Y., 16, 18, 49 Canning, D., 92 Case, Anne, 10, 203

Chaloupka, Frank J., 264 Chandra, A., 352 Charles, K. K., 178 Cheng, Ing-Haw, 130 Chiappori, Pierre-Andre, 53, 54, 91 Choi, James, 3, 57, 79, 82 Chu, C. Y. C., 91 Clark, A. E., 178, 187, 194 Clements, Jonathan, 19 Cocco, Joao, 16, 18, 49 Coile, Courtney C., 132, 164, 168 Conde, W. L., 354 Corder, L., 284, 313 Coronado, Julia L., 131, 132, 168 Crimmins, Eileen M., 203, 285 Cristol, Steven, 83 Cutler, David M., 8, 276, 354 Dahlmann, Nicolaus, 332 Daviglus, M. L., 355 Deaton, Angus, 9, 91, 101n8, 323, 356 Dhar, Ravi, 81 Diamond, P., 93, 180 Doak, C. M., 354 Drèze, Jean, 321 Duflo, Esther, 323 Duggan, M., 291 Dusenberry, J. S., 356 Eibner, C., 357 Erikson, R., 356 Evans, Willian N., 266, 268, 357

Farrelly, Matthew C., 266, 268 Feldstein, Martin, 34, 38, 93 Filmer, Deon, 318 Fisher, E. S., 352 Flegal, K. M., 352 Floud, Roderick, 317, 333 Foege, William H., 203 Fogel, Robert W., 317, 350 Frankenberg, E., 91 Freeman, Vicki A., 210, 284 French, Eric, 130 Fried, Linda P., 203 Fries, J. F., 284 Gale, W. G., 93 Gallet, Craig A., 269, 271, 273 Garber, Alan, 9, 312, 313 Gitlin, Laura N., 238 Glaeser, Edward, 8 Gokhale, J., 91 Goldman, D., 284, 285, 291 Gollier, Christian, 18 Gomes, Francisco, 16, 18, 49 Gourville, John T., 80, 83 Graham, Evarts, 275 Greene, W., 188 Gregory, Annable, 317, 333 Grossman, Michael, 264 Gruber, Jonathan, 174, 180 Gu, X. L., 284, 285, 288, 291 Guralnik, Jack M., 203 Gustman, Alan, 127n1, 129 Harding, J. E., 356 Havashi, F., 91 Hermalin, A. I., 91 Holtz-Eakin, Douglas, 130, 162 House, James S., 204 Hoynes, H. W., 91 Huberman, Gur, 81 Hurd, Michael, 6, 131, 142, 164, 390 Imbens, Guido W., 129, 131n3, 162 Ingegneri, D., 285 Iyengar, Sheena S., 79, 81 Jiang, Wei, 79, 81 Johns, L., 370 Jørgensen, M. H., 332 Joulfaian, David, 130, 162 Jürges, Hendrik, 6, 188 Juster, F. Thomas, 128, 132n6, 390

Kadiyala, Srikanth, 276 Kapteyn, A., 373 Keehan, S. P., 100 Keith, Verna M., 238 Kelley, A. C., 92 Kemper, Peter, 237 Kézdi, Gabor, 54, 164 Khitatrakun, Surachai, 132 Kinsella, K., 92 Kohnz, S., 174, 180 Kotlikoff, L. J., 91, 97n3 Kronenfeld, Jennie Jacobs, 238 Krueger, D., 93 Kubler, F., 93 Lai, Mun-Sim, 5 Laibson, David, 3, 82 Lakdawalla, D., 284, 285, 291, 313 Landrum, Mary Beth, 8 Landua, D., 188 Lazear, E. P., 91 Lee, R. D., 90, 91, 92, 96 Lee, Ronald, 5, 315 Lee, S.-H., 90 Leibfritz, W., 91 Lepper, Mark, 81 Levin, Dan, 264 Levine, Phillip B., 132, 164, 168 Lillard, L. A., 91 Lindeboom, M., 178 List, John A., 269, 271, 273 Lubotsky, Darren, 203, 356 Lupton, Joseph, 132n6 Luttmer, E. F., 357 Lyon, Herbert L., 264 MacDonald, Alphone L., 321 MaCurdy, Thomas, 9, 51, 312, 313 Madrian, Brigitte, 3, 57, 79, 81, 82, 83n1 Maenhout, Pascal, 16, 18, 49 Maier, Frank A., 264, 269 Manton, K. G., 284, 285, 288, 291, 313 Marmot, Michael, 11, 361, 363, 368, 386 Marquez, Jessica, 19 Martin, L. G., 284 Martorell, Reynaldo, 336 Mason, Andrew, 5, 90, 92 Mastrobuoni, G., 174, 180 Mathieson, Kathleen M., 238 Mazzocco, Maurizio, 54 McGarry, Kathleen, 91, 142, 164 McGinness, J. Michael, 203

McKeown, Thomas, 350 McNally, William D., 75 Mehra, Rajneesh, 32, 51 Melia, J., 370 Melzer, David, 204 Merton, Robert C., 18 Michael, R. T., 91 Michaelides, Alexander, 18 Michaelsen, K. F., 332 Miller, Tim, 5, 92, 354 Monterio, C. A., 354 Montgomery, Edward, 266, 268 Moxey, E., 285 Munnell, Alicia, 32, 93 Murphy, Kevin M., 93, 264 Newman, Sandra, 238 Norburn, Jean E. Kincade, 237 Nowlis, Stephen, 81 Oldfield, Zoe, 11 Pardes, H., 285 Parker, Jonathan, 132n6 Paxson, Christina, 203 Perozek, Maria, 131, 132, 168 Peterson, Kurt, 332 Philipson, Tomas J., 318 Poisal, J. A., 290 Popkin, B. M., 354 Portrait, F., 178 Poterba, James, 2, 16, 17, 18, 27, 32, 33, 51, 91, 132 Prescott, Edward, 32, 51 Preston, S. H., 93, 350 Pritchett, Lant, 318, 350, 351 Puoane, Thandi, 336 Rauh, Joshua, 2, 16, 17, 27, 33, 51 Ravelli, G. P., 355 Razin, A., 93 Reti, Monika, 6, 131 Reynolds, S. L., 285 Rohwedder, Susann, 6 Rosen, Harvey, 130, 162 Rubin, Donald B., 129, 131n3, 162 Sacerdote, Bruce, 129, 131n3, 162 Sadka, E., 93 Saito, Yasuhiko, 203, 285 Salive, Marcel E., 203 Samuelson, P., 91 Samuelson, William, 17, 18

Samwick, Andrew, 15, 18, 93, 127n1 Schmidt, I. M., 332 Schmidt, R. M., 92 Schnabel, R., 174, 179, 180 Schoenberg, Erika H., 264 Schoeni, Robert F., 91, 203 Schräpler, J., 188 Schwartz, L. M., 370 Sealey, Peter, 83 Sen, Amartya K., 318, 321 Sevak, Purvi, 130, 164 Sevilla, J., 92 Shea, Dennis, 57, 79, 81, 83n1 Shiller, Robert, 38, 39 Shoven, John B., 51 Simon, Julian L., 264 Sirovich, B. E., 370 Skinner, Jonathan, 15, 315 Smith, James P., 11, 132n6, 360, 373, 390, 397-98, 402 Soares, Rodrigo R., 318 Soman, Dilip, 80, 83 Spivak, A., 97n3 Stafford, Frank, 132n6 Stallard, E., 284, 313 Steckel, Richard H., 317 Stein, Z. A., 355 Steinmeier, Thomas, 127n1, 129 Steptoe, A., 368, 386 Stewart, Kate, 8 Stock, J. H., 180 Stuck, Andreas E., 203 Summers, Lawrence, 350, 351 Sunden, Annika, 32 Susser, M. W., 355 Suzman, Richard, 128 Swagel, P., 93 Toffler, Alvin, 83 Tomes. N., 93 Tung, An-Chi, 5 Van den Berg, G. J., 178 Van Praag, B. M. S., 188 Van Soest, A., 373 Velkoff, V. A., 92 Venti, Steven, 2, 16, 17, 27, 31, 33, 51 Viceira, Luis M., 16, 18, 49 Viscusi, W. Kip, 276 Wachter, Kenneth, 317, 333 Weisbenner, S. J., 91, 104

Weiss, Carlos O., 237 Weiss, Yoram, 54 Wilhelm, Mark, 130 Wilkinson, R. G., 360, 361 Williamson, J. G., 92 Willis, Robert J., 54, 91 Winkelmann, L., 178, 187 Winkelmann, R., 187 Wise, David A., 2, 16, 17, 27, 31, 33, 51, 174, 180 Woloshin, S., 370 Wynder, Ernst L., 275

Zeckhauser, Richard J., 18 Zeldes, Stephen, 18 Zimmer, Zachary, 204

## **Subject Index**

The letters f and t following a page number denote figures and tables, respectively.

Activities of daily living (ADLs), 206 ADL, 206 Age reallocations, 94 Agincourt, South Africa, 325; body mass index and, 336-37; children's weights in, 333, 335f; correlates of health for, 340-47; depression and anxiety in, 340, 341t; economic and educational status in, 326-32; health status measures, 332-40; heights by age in, 333-36, 334f; household-level characteristics of, 327t; hypertension and, 337; individual characteristics, 328, 329-30t; physical symptoms and, 337-40, 339t; self-reported health status, 328-32, 331f. See also Khayelitsha, South Africa; South Africa AHEAD (Assets and Health Dynamics of the Oldest Old), 361n1, 362

Asset allocation decisions: age-specific patterns in, 18; optimal age-dependent, 17–20; retirement wealth and, 15

Asset allocation strategies, 2–3; risks of, 16

Asset-based reallocations, 96; for elderly in Taiwan, 114; for elderly in United States, 114; in NT Flow Account, 101–2

Assets and Health Dynamics of the Oldest Old (AHEAD), 362, 362n1 Bequests, 103, 105-6 Better educated, coping strategies and, 224-39 Body mass index, in Agincourt, Khayelitsha, and Udaipur, 336-37 Cancer, in United States vs. England, 369 - 70Capital-based reallocations, 96 Children of the Depression Age (CODA), 362, 362n1 China: life expectancy and growth rates in, 323; progress in, 321 Cholesterol, for males in United States vs. England, 387-88 Cigarette prices: in Europe, 265, 265t; smoking and, 264-66; in United States, 265, 265t. See also Smoking CODA (Children of the Depression Age), 362, 362n1 Coping: for ADL impairment, 231-33, 231t; assistive technologies for, 226–27; defined, 207; for IADL impairment, 232-33, 232t; impact of coping strategies on, for ADL difficulties, 234, 235t; impact of coping strategies on, for IADL difficulties, 234, 236t; by income and education, 213-14, 213f, 220, 221-

22; by income and education by

Coping (*cont.*) gender, 220, 223f; income and education gradients in, 214–15, 214f, 215f; personal help for, 226–27, 227t; socioeconomic status and, 8

Coping strategies: better educated and, 224–39; by gender, 233, 234t; by SES group, 227–31, 228t, 229t; by types of help, 229f, 230f

Coronary heart disease, in United States vs. England, 368

- C-reactive protein (CRP), in males in United States vs. England, 386
- Credit-based reallocations, 97
- Demographic dividend, 92
- DI. See Social Security Disability Insurance (DI)
- Diabetes: self-reports and biological reports for, United States vs. England, 377–80; in United States vs. England, 365–67
- Disability, 210–11; coping rates and, 211t; defined, 206; descriptive statistics for, 209–24; gradients in, SES and, 203–4; intrinsic, 206–7, 210–11, 211t, 212–13, 212f, 216–17; measures of, 206–9; residual, 207
- Disability pensions, well-being and, 7
- Disabled elderly: defining, 287–88; literature on, 284–86; Medicare Part D spending and, 283–84
- Drinking, as male risk factor in United States and England, 374–76, 375t

Early retirement. See Germany

Education, SES and, 203

ELSA (English Longitudinal Survey of Aging), 363–64

England: cancer in, vs. United States, 369– 70; cholesterol for males in, vs. United States, 387–88; coronary heart disease in, vs. United States, 368; C-reactive protein in males, vs. United States, 386; descriptive statistics for SES health gradient in, 364–70; diabetes in, vs. United States, 365–67; drinking as male risk factor in, vs. United States, 374–76, 375t; health outcomes by wealth in, 402–4, 403t; health outcomes in, by income tercile and years of schooling, 366t; heart attacks in, vs. United States, 368; heart disease in, vs. United States, 368; hypertension in, vs. United States, 367-68; income gradients and health status in, 388-97; lung disease in, vs. United States, 369; male risk factors in, 374-76, 375t; obesity, as male risk factor in, vs. United States, 374-76, 375t; poor health and income status in, 397-402, 398t; poor health and work status in, 397-402, 398t; self-reports and biological reports by SES, by education, 382-85t; self-reports of health status in, 370-74, 371t, 372t; self-reports vs. biological reports for diabetes in, 377-80; selfreports vs. biological reports for high blood pressure in, 380-81; SES gradient and health in, 11; stroke in, vs. United States, 368-69; wealth and health outcomes in, vs. United States, 402-4, 403t

- English Longitudinal Survey of Aging (ELSA), 363–64
- Europe, smoking in, 8-9
- Familial transfers: advances in modeling of, 91; constructing estimates of, 91–92; variation in importance of, 92. See also Transfers
- Fibrogen, for males in United States vs. England, 386–87
- 401(k) plans, 3, 15; asset allocation strategies, 3; calibrating wealth simulations in, 24–33; life-cycle funds and, 19–20; modeling retirement wealth accumulation in, 21–24; participation in, 3–4, 57–58. *See also* Quick Enrollment

Generational accounting (GA), 103

- German Socio-Economic Panel (GSOEP), 186–93
- Germany: early retirement and well-being of retirees in, 186–93; early retirement as beneficial in, 177–78; early retirement in, 173–74; early retirement incentives in, 178–80; estimating effect of early retirement on well-being in, 193–98; pension benefit formula, 175– 76; retirement behavior in, 6–7; trends in program generosity in, 180–84; well-being of elderly population in, 184–86
- Great Britain. See England

- GSOEP (German Socio-Economic Panel), 186–93
- Health: income and, 10–11; SES gradient and, in England and U.S., 11. See also Well-being
- Health and Retirement Study (HRS), 128, 361–62, 362n1; anticipated retirement of respondents in, 141–51; labor force participation in, 139–41; wealth change and retirement probabilities of respondents in, 151–61; wealth in the population of, 132–39
- Heart attacks, in United States vs. England, 368
- Heart disease, in United States vs. England, 368
- High blood pressure. See Hypertension
- HRS. See Health and Retirement Study (HRS)
- Hypertension: in Agincourt, Hayelitsha, and Udaipur, 337; self-reports and biological reports for, United States vs. England, 380–81, 380t, 381t; in U.S. vs. England, 367–68
- IADL. See Instrumental activities of daily living (IADLs)
- Impairments, coping with, 8
- Income, health and, 10–11. See also Wealth, health outcomes and, in United States and England
- Income gradients, health status and, United States vs. England, 388–97
- India: health and economic status in, 10; life expectancy and growth rates in, 323; Preston curve and, 319–21, 322f; progress in, 321. *See also* Udaipur, India
- Inheritances, 130
- Instrumental activities of daily living (IADLs), 206
- Intergenerational transfers, 4–5; demographic dividend, 92; inequities and, 92–93; research community and, 89–90
- Interhousehold transfers, 103-4
- Inter vivos transfers, 103, 105; interhousehold transfers, 103–4; intrahousehold transfers, 103, 104–5
- Intrahousehold transfers, 103, 104-5
- Intrinsic disability, 206–7; data sets for, 207; population reporting, 210–11, 211t; re-

gression results for, 216–17t; SES and, 212–13, 212f

- Khayelitsha, South Africa, 323–25; body mass index and, 336–37, 337f; children's weights in, 333, 335f; correlates of health for, 340–47; depression and anxiety in, 340, 341t; economic and educational status in, 326–32; health status measures, 332–40; heights by age in, 333–36, 334f; household-level characteristics of, 327t; hypertension and, 337; individual characteristics, 328, 329–30t; physical symptoms and, 337–40, 339t; prevalence of conditions in, 338f; self-reported health status, 328–32, 331f. See also Agincourt, South Africa; South Africa
- Lifecycle deficits, 99–101; in Taiwan, 107– 10, 110f; in United States, 107–10, 110f Life-cycle funds: assets, 19, 19f; 401(k)
- plans and, 19–20; mutual funds and, 19–20, 20t; rise of, 18–19
- Life-cycle investment strategies, 3
- Life-cycle portfolio selection, 17–18
- Lifecyles: in Taiwain, 5; in United States, 5
- Life expectancy, growth rates and, 323, 324f
- Lung disease, in United States vs. England, 369
- Medicare Current Beneficiary Survey (MCBS), 284; pharmaceutical data, 286–87; underreporting of pharmaceutical use and, 289–90
- Medicare Modernization Act (2006), 283
- Medicare Part D, 9–10; spending on, disabled elderly and, 283–84
- Medicare populations: changes in disease prevalence in, 302–9, 303–5f; changes in size and composition of, 291–92; conclusions for pharmaceutical consumption of, 309–11; literature on, 284–86; methodology for examining pharmaceutical consumption of, 287–90; results for pharmaceutical consumption of, 290–309; tracking changes in health of and types of drugs used by, 288–89; trends in composition of prescribed drugs for, 295–302; trends in noninstitutionalized, 291t; trends in pharmaceutical expenditures for, 292–

- Medicare populations (*cont.*) 95, 296f, 297–99f; underreporting pharmaceutical use and, 289–90
- Mutual funds, life-cycle funds and, 19–20, 20t
- National Health and Nutrition Examination Survey (NHANES), 362–63
- National Health Interview Disability Supplement (NHIS-D), 206–9
- National Income and Product Accounts, 5; background for, 91–92
- National Transfer Accounts (NTAs), 5, 90; asset-based reallocations, 101–2; estimation and data sources for, 106; lifecycle deficit, 100–101; overview of, 93–98; purpose of, 93–94; for Taiwan, 106–18; transfers, 102–4; for United States, 106–18
- National Transfer Flow Account, 98–106; for Taiwan, 98–99, 99t
- NHANES (National Health and Nutrition Examination Survey), 362–63
- NHIS-D (National Health Interview Disability Supplement), 206–9
- NTAs. See National Transfer Accounts (NTAs)
- Obesity, as male risk factor in United States and England, 374–76, 375t
- Obesity rates: in Agincourt, Hayelitsha, and Udaipur, 336–37; by developed country, 255, 257f
- Population aging, 93
- Prescription drug use, 9–10
- Preston curve: India and, 319–21, 322f; South Africa and, 321–23, 323f; United States and, 322f
- Private transfers, 103–6; bequests, 104, 105– 6; inter vivos transfers, 103–5; in Taiwan, 119; in United States, 119
- Property-based reallocations, 97
- Public transfers, 103; to children, in Taiwan, 109f, 113; to children, in United States, 109f, 113; in Taiwan, 114–15, 119; in United States, 114–15, 119
- Quality of life, SES and, 203
- Quick Enrollment, 3–4, 58; conclusions about, 79–81; implementation of health services company (Company

A), 59–63; 401(k) outcomes at Company A, 64–74; 401(k) outcomes at Company B, 75–79; at manufacturing firm (Company B), 63–64. *See also* 401(k) plans

- Reallocation systems, 95–96; asset-based, 96; capital-based, 97; credit-based, 97; forms of, 96–98; NTA classifications of, 97t; property-based, 97; for Taiwan, 110–17; transfers, 97–98
- Residual disability, 207; data sets for, 207-8
- Retirement: research approaches for finding effects of stock market on, 129–32; wealth accumulation and, 127–29
- Retirement behavior, 5–7; in Germany, 6–7
- Retirement saving, 2-4
- Retirement wealth: asset allocation decisions and, 15; conclusions about effect of allocation strategies on, 43–49; distribution of, in study, 34–39; expected utility of, 39–43; modeling accumulation of, in self-directed retirement plans, 21–24; stocks and, 16
- Retirement wealth distribution, 3
- Self-directed retirement plans, modeling retirement wealth accumulation in, 21–24
- Self-reports of health status: for diabetes, United States vs. England, 377–80, 377t; for high blood pressure, United States vs. England, 380–81; by SES by education for United States and England, 382–85t; shortcomings of, 376; in United States vs. England, 370–74, 371t, 372t
- SES. See Socioeconomic status (SES)
- Smoking, 8–9; belief differences across countries about, 273, 274t; beliefs about health consequences of, 273–78, 277f; data on consumption of, 263–64; income and, across countries, 269–73, 270f; literature on cigarette prices and, 264–66; as male risk factor in United States and England, 374–76, 375t; regulations, across countries, 268–69, 269f; regulations, United States vs. European nations, 267–68, 268t; regulations in U.S. states and, 266–67, 267f; relative price of tobacco and, 265–66, 266f; theoretical determinates of, 259–

63; workplace bans on, 266. *See also* Cigarette prices

- Smoking rates: beliefs about health effects and, 258–59; cigarette prices and, 256– 57; in developed countries, 256f; income and, 257–58; in 1980 and 2000, 256, 259f; in United States, 255–56, 256f, 258f
- Social Security. See Germany
- Social Security Disability Insurance (DI), 291–92; primary causes for eligibility for, 292t
- Social Security wealth (SSW), estimating, 27–28
- Socioeconomic status (SES): coping and, 8; gradients in disability and, 203–4; quality of life and, 203
- South Africa: health and economic status in, 10; history of health and income in, 321; life expectancy and growth rates in, 323; Preston curve and, 321–23, 322f. See also Agincourt, South Africa; Khayelitsha, South Africa
- Stock market, effects of, on retirement, 129–32
- Stocks, retirement wealth and, 16
- Stroke, in United States vs. England, 368– 69
- Support systems: in Taiwan, 5; in United States, 5
- Taiwan: age pattern of consumption in, 119–20; age reallocations in, 94–95, 95f, 96f; asset-based reallocations for elderly in Taiwan, 114; key features of, vs. United States, 106–7; lifecycle deficit in, 107–10; lifecycles in, 5; life cycles in, 90; National Transfer Accounts in, 106–18; old-age allocation systems in, 113–14; private transfers in, 119; public transfers in, 114–15; public transfers to children in, 109f, 113; reallocation systems in, 90–91, 110–17; sources of support in, 117–18; support systems in, 5, 90
- TIPS (corporate stock, nominal long-term government bonds, and inflationindexed long-term bonds), calibrating returns of, 32–33
- Transfers, 96, 97–98; for elderly in Taiwan, 114; for elderly in United States, 114; intergenerational, 4–5, 89–90, 92–93;

interhousehold, 103–4; inter vivos, 103; intrahousehold, 103, 104–5; in NTA system, 102–3; private, 103–6; public, 103. *See also* Familial transfers

- 2003 Health Survey for England (HSE), 364
- Udaipur, India, 323; body mass index and, 336–37, 337f; children's weights in, 333, 335f; correlates of health for, 340–47; depression and anxiety in, 340, 341t; economic and educational status in, 326–32; health status measures, 332– 40; heights by age in, 333–36, 334f; household-level characteristics of, 327t; hypertension and, 337; individual characteristics, 328, 329–30t; physical symptoms and, 337–40, 339t; prevalence of conditions in, 338f; selfreported health status, 328–32, 331f. *See also* India
- Unexpected wealth gains, 129-32
- United Kingdom. See England
- United States: age pattern of consumption in, 119-20; asset-based reallocations for elderly in, 114; cancer in, vs. England, 369-70; cholesterol for males in, vs. England, 387-88; cigarette prices in, 265; coronary heart disease in, vs. England, 368; C-reactive protein in males, vs. England, 386; descriptive statistics for SES health gradient in, 364-70; diabetes in, vs. England, 365-67; drinking as male risk factor in, vs. England, 374-76, 375t; fibrogen for males in, vs. England, 386-87; health outcomes by wealth in, 402–4, 403t; health outcomes in, by income tercile and years of schooling, 366t; heart attacks in, vs. England, 368; heart disease in, vs. England, 368; hypertension in, vs. England, 367-68; income gradients and health status in, 388–97; key features of, vs. Taiwan, 106-7; lifecycle deficit in, 107-10; lifecycles in, 5; life cycles in, 90; lung disease in, vs. England, 369; male risk factors in, 375t; National Transfer Accounts in, 106-18; obesity as male risk factor in, vs. England, 374-76, 375t; old-age allocation systems in, 113-14; poor health and income status in, 397-402, 399t; poor health and work status in, 397-

## United States (cont.)

402, 399t; Preston curve and, 322f; private transfers in, 119; public transfers in, 114-15; public transfers to children in, 109f, 113; reallocation systems in, 90-91, 110-17; self-reports and biological reports by SES, by education, 382-85t; self-reports of health status in, 370-74, 371t, 372t; self-reports vs. biological reports for diabetes in, 377-80, 377t, 380t; self-reports vs. biological reports for high blood pressure in, 380-81; self-reports vs. biological reports for hypertension in, 380t, 381t; SES gradient and health in, 11; smoking in, 8-9; sources of support in, 117-18; stroke in, vs. England, 368-69; support systems in, 5, 90; wealth and

health outcomes in, vs. England, 402– 4, 403t

War-Babies Cohort, 362, 362n1

Wealth, health outcomes and, in United States and England, 402–4, 403t. *See also* Income, health and

- Wealth accumulation, retirement and, 127–29; modeling, 21–24
- Well-being: disability pensions and, 7; effect of retirement on, 6–7; estimating effect of early retirement on, 193–98; health and, 317; rankings of, 317; of retirees, early retirement and, 186–93; wealth and, 317
- Windfall gains, approaches to prior research on labor supply and, 129–32