Methodological Issues in International Research: Advancing an Agenda for Global Aging

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Outline

- Why global population aging matters
- Core of measurement-translation, latent constructs
- Data resources, comparative and cross-national surveys
- New research designs
What is the Problem?

- Changing demography of aging worldwide, especially in the developing world
- Burden of chronic illness
- Issues of compression of morbidity
Global Population Aging

Percent of Population Aged 65 & Over

Source: United Nations, 2010
Policy Implications

- Global leaders see a higher cost for social services, possible labor shortages, and higher costs for pensions, and health care as probable outcomes from a larger older population.

What are the methodological challenges in addressing these issues?
The fundamental problem facing the comparative survey researcher relates to the complexity and subjectivity of language, and the fact that complete equivalence of concepts in different linguistic, cultural, and social class contexts may be in principle impossible to achieve.

Yet language remains the only medium through which information concerning subjective states, values, and beliefs can be collected. That language and the subjective constructs to which it refers are influenced by a wide range of cultural and social factors.

This fact has particular relevance for comparative aging research since older individuals are often monolingual in their native languages and more tied to traditional cultures than younger individuals.

Essential Reality of Language

- The ideal of contemporary quantitative data collection methodologies is to be as objective as possible and to minimize the potential for interviewer bias or influence from the data collection procedure.

- Much of the subject matter of social and behavioral research involves culturally-constructed subjective information.

- Must arrive at the same semantic understanding and at a reasonably similar understanding of the cultural context in which the communication occurs.
Fundamental Limitations

- Best practices consist of clear documentation, the use of teams that are fluent in source languages and target languages and that include expertise in survey research methods.

- Yet universally accepted validity criteria do not exist and perhaps in principle cannot.

- Language provides the only means of communicating our understanding of reality, but it remains highly embedded in culture and it is influenced by politics, economics, and a large number of individual idiosyncratic factors.
Models of Complex Interconnectedness of Cultural and Structural Factors

- Analysis of health disparities in older populations must be informed of the high correlation among cultural and structural factors.

- Excess focus on cultural factors runs the risk of cultural essentialism in which non-structural factors are seen as the major causes of differential levels of health and illness.
Measurement of Hispanic Ethnicity

- Personal- Self-identification
- Bureaucratic- Overly restrictive
- Family- Intermarriage
Data Resources

Publicly Available Datasets
- National Archive of Computerized Data on Aging
- Access to Restricted Data
- NIH Data Sharing
Comparative Aging Data

NIA has pioneered cross-national research, sponsoring collaborative international projects, and disseminating findings in aging-related conditions and concerns affecting people worldwide.
Spurred by NIA, NACADA operates under the auspices of the ICPSR and is responsible for archiving data sets concerned with the process of aging, health-related subjects, and the attitudes and behavior of the aged population. NACDA publishes an annual data collections catalog entitled *Data Collections From the National Archive of Computerized Data on Aging*. 
Specific Aims

– To obtain reliable, valid and comparable data on levels of health on a range of key domains for older adult populations.

– To examine patterns and dynamics of age-related changes in health using a longitudinal design.

– To supplement and cross-validate self-reported measures of health and the anchoring vignette approach to improving comparability of self-reported measures, through measured performance tests for selected health domains.

– To collect data on health examinations and biomarkers to improve reliability of data on morbidity, risk factors and monitor effect of interventions.
Model Longitudinal Research Designs

- U.S. Health and Retirement Study
- English Longitudinal Study of Ageing (ELSA)
- Survey of Health, Ageing, and Retirement in Europe
- Mexican Health and Aging Study (MHAS), Korean Longitudinal Study of Aging
- Chinese Health and Retirement Survey
- Longitudinal Study of Aging in India
Investigations of Healthful Aging among Older Hispanics

- Focus on functioning
- Improve health and well-being
- Decrease disease and death
- Increase options in care and living arrangements
Inventory of Hispanic Data

- To inform the development of the research agenda on Hispanic healthful aging.
- To use a variety of data sources to understand the implications of longevity for the Hispanic population, including biomarkers.
- To understand changing patterns in Hispanic health care needs as the result of profound social forces including declines in fertility, increase in divorce, and geographic mobility.
- To assess how economic progress has given rise to an inherent contradiction concerning the financial and day-to-day responsibility by adult children for their elderly parents.
- To provide opportunity to examine new institutional arrangements and alternative health and long-term health care alternatives.
Secondary Data Sources

“Harmonization”

1) Health and Retirement Study (HRS) and the Study of Assets and Health Dynamics among the Oldest Old (AHEAD) make possible the investigation of the impact of individuals’ economic situations in the years before retirement on their welfare and health in their post-retirement years.

2) The Third Health and Nutrition Examination Survey (HHANES III) a particularly useful source of information on the incidence and prevalence of type-2 diabetes in the young-old population of Mexican ancestry.

3) Focused data collection efforts, such as the Border Epidemiologic Study of Aging (BESA).

4) Hispanic Established Populations for the Epidemiologic Studies of the Elderly (H-EPESE), a twelve-year longitudinal panel study of older Mexican Americans, which provides important in-depth health and function information for a single Hispanic group.

5) Mexican Health and Aging Study (MHAS) allows for comparative analyses of the health of older Mexicans in U.S. and Mexico.

6) Hispanic Community Health Study (HCHS) role of cultural adaptation and the ecology of poverty in the development of chronic disease among Hispanics 18-74 years in four American cities.
New Research Designs

- Follow-up to study intermediate outcomes, monitor trends, examine transitions and life events, and address relationships between determinants and health and health-related outcomes.

- To develop a mechanism to link survey data to data from demographic surveillance sites.

- To build linkages with other national and cross-national ageing studies – SHARE, ELSA, KLoSA, MHAS, SABE.

- To provide a public-access information base for an evidence-based policy debate among all stakeholders.
Questions

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