



Does increasing social participation
improve healthy life expectancy?
A scenario analysis for older individuals
with multimorbidity in Europe.

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Summary

- Main question: Does increasing social participation among older individuals with multimorbidity improve the healthy life expectancy?
- Conclusion: It does not

“Increases in the social participation rate of older individuals with multimorbidity have a very modest effect on HLE (0.0-0.1 years).”

Comments (1)

- Indications for positive outcome
 - Cross sectional relation social participation and disability
 - Minor causal effects social participation and disability
 - Country with highest participation rate also highest HLE

Participation rates

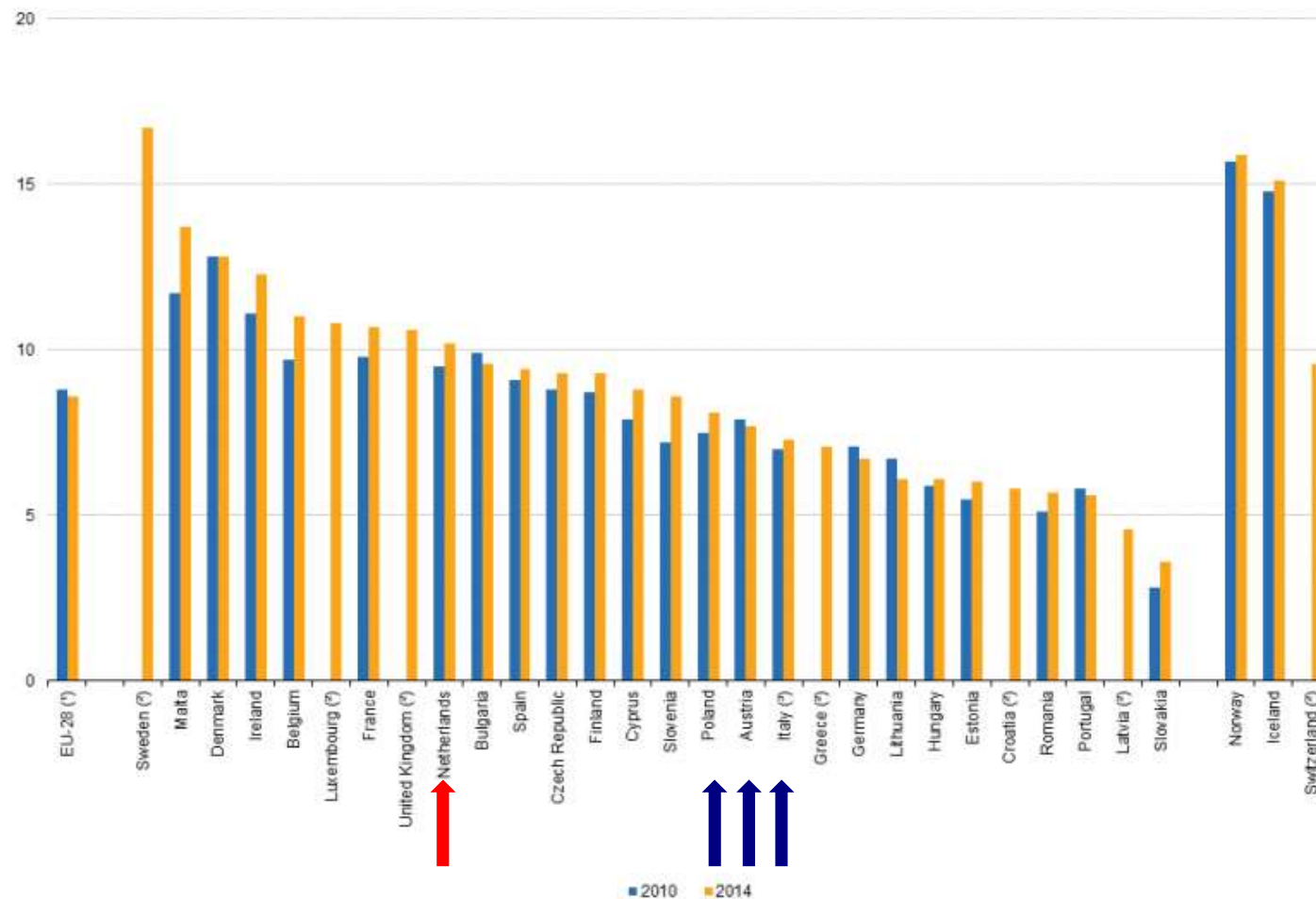
Table 2.1 Social participation rates (%) among 50+, 2010

	Prevalence	volunteering		informal care giving		employment	
	MM	MM	no MM	MM	no MM	MM	no MM
→ Austria	21	18	18	21	21	10	27
→ Italy	23	9	13	17	22	6	30
→ Netherlands	12	31	39	26	34	13	36
→ Poland	23	2	2	12	20	5	20
Maximum		31	39	41	46	21	46

Table 2.2 Social participation rates (%) among 50+, 2010, continued

	Prevalence	Educational activities		Leisure activities		Religious activities	
	MM	MM	no MM	MM	no MM	MM	no MM
→ Austria	21	10	14	23	30	21	20
→ Italy	23	1	2	10	14	14	11
→ Netherlands	12	11	21	39	46	16	18
→ Poland	23	0	3	2	5	43	41
Maximum		15	23	49	56	43	41

Healthy life expectancy at age 65 (females)



(*) 2010: estimate.

(†) 2010: not comparable due to a break in series.

(‡) Data for 2011 instead of 2010.

Comments (1)

- Indications for positive outcome
 - Cross sectional effects
 - Minor causal effects
 - Country with highest participation rate also highest HLE
- Different scenarios for increased level of participation
- Different effects of social participation on disability
- Pleasant to read

Comments (2)

- Background information on the study sample

Background information

Table 2.1 Social participation rates (%) among 50+, 2010

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Comments (2)

- Background information on the study sample
- Why focus on multimorbidity?

Background information

70% disabled

35% disabled

(in LASA)

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- Background information on the study sample
- Why focus on multimorbidity?
- Can we expect that an intervention for $x\%$ of the population can affect the HLE of the total population?

Target population (in SHARE)

No multimorbidity +
not disabled/disabled



Multimorbidity
+ disabled



Multimorbidity
+ not disabled



➤ $100/4 * 0.0 = 0 \text{ HLE}$
 $100/4 * 0.1 = 2.5 \text{ HLE?}$

Comments (2)

- Background information on the study sample
- Why focus on multimorbidity?
- Can we expect that an intervention for $x\%$ of the population can affect the HLE of the total population?
- Conclusion accepted rather than discussed