

# Prospective Ageing—Literature review

*mz*

Independent discoveries of this principle: Ryder (1975), Fuchs (1984) and Sanderson and Scherbov (2005), also Bayó and Faber (1981).

Siegel (1980) also mentions Jackson's 1980 Minorities and aging as a source, but haven't been able to get a copy yet.

## **Cain1974—*The growing importance of legal age in determining the status of the elderly***

The distinction between the elderly and adults as a special status is first formalised by Bismarck, who got passed in 1899 the Old Age Insurance Law, for which workers were eligible at age 71.

Cain speaks of the paradox that the more we use chronological age as a legal category delimiter, the more obvious it is that it is inadequate due to differences in maturation and retention of skills, adaptability etc.

The American Social Security Act of 1935 defined a distinct legal status for the elderly at age 65. Although the number was not based on any serious analysis or anything, it just felt that lower would be too expensive and higher would not get support due to high unemployment levels at the time.

## **Ryder (1975)—*Notes on stationary populations***

“challenged the conventional view in which people are classified as old based on a fixed chronological age. In the study of aging he argued that it would be preferable to consider people as old not based on their chronological ages, but instead on their expected remaining lifetimes.” Sanderson and Scherbov (2015)

Ryder seems to first come up with the old age threshold, but calls it the *index of old age*:

“We propose that some arbitrary length of time, such as 10 years, be selected and that we determine at what age the expectation of life is 10 years, that age to be considered the point of entry into old age [...]” Ryder (1975)

## **siegel1980—*On the demography of Ageing***

This is a presidential address at the Population association of America from 1980.

Definitions of ageing are not obvious. Cultural definitions vary; demographers use chronological age, but these require an arbitrary cut off point. An alternative concept is based on the average number of years until death. Here quotes Ryder and Jackson (the book I can't get).

“Like average life expectancy, it applies to population groups rather than individuals.”

What are the implications of this? Should benefits and privileges of old age be accorded to men and blacks at younger ages than whites and women? Mentions Cain (1974) discussing the use of chronological age vs prospective age in court decisions.

One issue with *old age based on age at death* is the lack of data. You need life tables for sub-groups of race, gender, even specific health conditions. But nothing else directly relevant in this paper I don't think

**Bayó and Faber (1981)—*Equivalent Retirement Ages, 1940-2050***

Actuarial note by the US Social security administration - office of the Actuary. They propose four measures, one of them (Measure A) is one where the retirement expectancy—time until death really—is kept the same as in the base year. They also have a more ‘fair’ measure, where they keep the ratio of work and retirement the same. They also say:

“[These measures] take into account mortality, but do not take into account morbidity. That is, they adjust for the expected length of life spent in retirement, but they ignore the question of whether that life is spent in a more or less healthy condition.”

One reason is that it is difficult to quantify, the other that it probably correlates with mortality

**Fuchs (1984)—*Though much is taken—reflections on ageing, health and medical care***

Quoted in Sanderson and Scherbov (2008) and Sanderson and Scherbov (2015) as an independent discovery of this principle, more elaborate than Ryder.

All literature about ageing starts off with sth on the proportion of people over 65. Why? The assumption is they are not in work, so output must be transferred from the working population to them. Additionally they are less healthy. So the definition of old age is very important. The chronological definition “is largely a concession to administrative convenience rather than the logical result of a closely reasoned argument.” One alternative would be to look at e.g. people within 5 years of death (but only ones already over 65). Or people over 65 but not in the labour force. These measures focus on the health and transfer payments respectively.

Health spending: projected to increase as the age distribution of the elderly is shifting towards older ages and health care utilization increases with age. This assumes the age-spending relationship holds constant over time. **But** this results in an overestimate: “health care spending among the elderly is not so much a function of time since birth as it is a function of time to death”. How much health care will a 75 year old utilize in 10 years time? That depends on medical technology, health care policy etc. but “to the extent that fewer 75-year-olds will be in the last or next-to-last year of life, a simple extrapolation from past utilization of 75-year olds is inappropriate”

**Sanderson and Scherbov (2005)—*Average remaining lifetimes can increase as human populations age* (Nature paper)**

**Two new measures:** (i) *the standardized median age* (ii) *the rescaled dependency ratio*

*Median age* is the most commonly used measure of population ageing apparently. This piece describes the idea of standardizing median ages in some sort of way to account for increased life expectancy, although it does not do a very good job at explaining it intuitively at all. . .

“Here we propose a new measure of ageing: the median age of the population standardized for expected remaining years of life.”

So while populations are growing older measured by median age, they can also be growing younger as measured by *standardized median age*. Similarly adjusting the old-age dependency ratio shows ageing is a lot slower than usually thought, and at times even reversing.

“Population ageing differs from the ageing of an individual. People who survive grow older with each year they live. Populations, on the other hand, can grow younger.”

A lot of things don’t depend on chronological age, but on time left to live e.g. the costs of medical care, retirement, bequests, consumption and the accumulation of capital.

So, using period life tables, you’ve got the *median age* and the *life expectancy at median age*. The first the age that divides the population into half. And it keeps going up. The lex at median is also the median remaining

lex - since half the population has a higher remaining life expectancy (those younger than the median) and the other half a lower remaining lex (those older than the median).

If median ages stayed the same (e.g. through migration), then remaining lex at the median age would go up—due to increases in longevity. But with the median age also going up, depending on how quickly it is increasing the remaining lex can go up slowly or even reverse. In the latter case the improvement in mortality rates are outweighed by the increased median age.

An example of this is the projection for Japan 2000 - 2040 where the median age is expected to increase from 41 to 55, while the remaining life expectancy at the median age will fall from 41 to 35. Afterwards the slow down of the median age increase leads to life expectancy at the median to increase as well. Their median age is rising so fast because of low fertility, high life expectancy and little in migration. In the US it is rising slowly, because of high fertility and migration.

The problem with *life expectancy at median age* is “that it is not directly comparable to the median age itself.” That’s why we need the *standardized median age* this means **the median age of the the life expectancy standardized population**. So you pick a reference year, e.g. 2000, and use that life table to assign people ages that have the same remaining life expectancy as they did in 2000. And then calculate the median age of this standardized population. By definition—if you’ve used the same country’s life table as the reference—the standardized median age will be the same as the median age in the reference year.

OK, so you take a population age distribution in a certain year, as well as the remaining life expectancies for each age. Then you match those with the remaining life expectancies in the reference year and replace their ages. Still not seeing an intuitive way to comprehend what is happening. So the remaining life expectancy at the standardized median age is now constant—it is the remaining life expectancy at the median age in the reference year.

Then in part II they use Lee and Goldstein (2003) rescaling—namely proportional rescaling—to compare the regular old age dependency ratio to one where the start and end of the work phase (20 and 65) rescale proportionally to changes in life expectancy. And it is of course very slow, considerably slower than the sometimes even quadrupling of the standard measure.

### Lee and Goldstein (2003)—Rescaling the life cycle: Longevity and Proportionality

Rescaling and economic behaviour: retirement trends: quote Kotlikoff (1981) as proposing two options for dealing with longer life expectancy: rise retirement in proportion with life expectancy or more than in proportion, which would keep the years of retirement constant. In fact age of retirement has been falling - until the end of the 20th century anyway.

If you look at the ratio of years worked to years in retirement, it used to be .1 in 1900 US and by 1995 it had almost quadrupled to .38

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