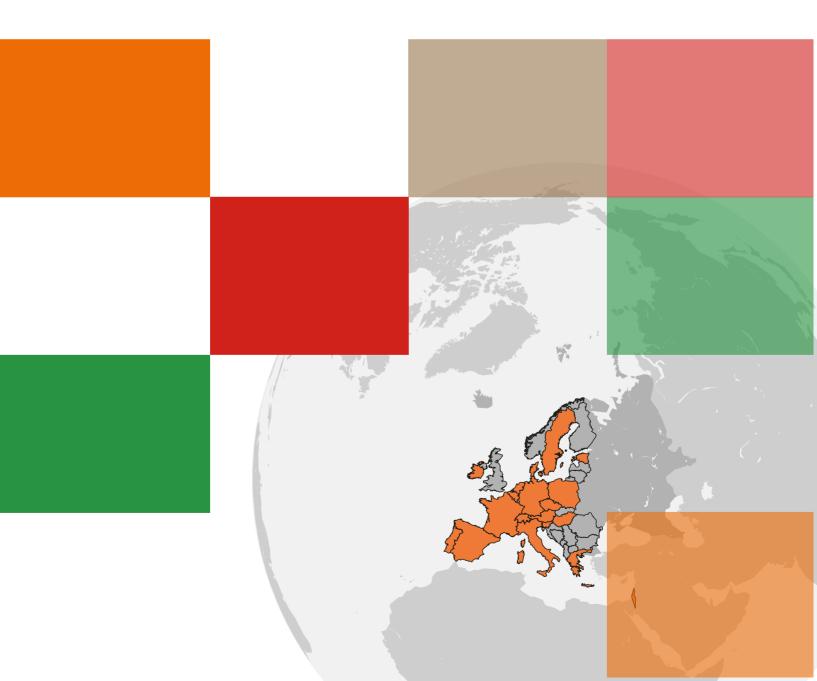


Annual Activity Report 2013









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Note: This Annual activity report is written to give an overview about the SHARE activities as a whole in the relevant time frame, but also to fulfill the requirements of Article 17 par. 1 of COUNCIL REGULATION (EC) No 723/2009. Therefore it has to reflect first of all the situation of SHARE as European Research Infrastructure Consortium having several but not all countries from the SHARE Consortium as members. This may cause possibly irritations as there may be discrepancies between scientific activities, e.g. participation in a wave on the one hand and formal membership in the SHARE-ERIC on the other hand.

Foreword

I am pleased to present the 2nd Annual Activity Report of SHARE-ERIC. This report provides a summary of all activities with focus on scientific, operational and financial issues of SHARE-ERIC. For once, it covers a one and a half year period, from July 2012 until December 2013. The reason for this is that the SHARE-ERIC Council decided on its last Council meeting on September 10, 2013 to adapt for the future the financial year to the calendar year.

The scientific work for SHARE requires coincident activities in different waves: The relevant time frame was characterized on the one hand by developing a new data release for the already existing waves, but on the other hand also by producing a First Result Book of the last Wave and by finalizing the current wave fieldwork and finally by preparing the next wave's questionnaire. This endeavor is quite challenging but it guarantees also a constant interaction between the waves – the best guarantee for SHAREs scientific progress.

We are very pleased that three more members have acceded in the meantime to SHARE-ERIC: Greece, Israel and Slovenia. Together with the founding members Austria, Belgium, Czech Republic, Germany, the Netherlands and Italy, SHARE-ERIC has now 9 full members and is expecting soon further accessions.

At the end of 2013 SHARE-ERIC is now ready for the change of its seat from Tilburg, in the Netherlands to Munich, Germany, where the legal conditions to host an ERIC were created in the meantime.

I would like to conclude my remarks by thanking in particular our partners from the Netherlands, who have hosted the SHARE-ERIC until now, as well as the SHARE-ERIC delegates for their support and last but not least the Country Team leaders and the whole SHARE community for their excellent scientific contributions.

Dr. Angelika Willms-Herget

Willus- Hupt

Chair of the SHARE-ERIC Council, February 2014



SHARE's Mission

The Survey of Health, Ageing and Retirement in Europe seeks to analyse the process of population ageing in depth. It is the first study to examine the different ways in which people aged 50 and older live in 20 European countries from Sweden to Greece and Portugal to Estonia. Its scientific potential lies in the extensive data gathered from more than 85.000 people all across Europe, covering the interplay between economic, health, and social factors in shaping older people's living conditions.



A. Scientific Aspects: Survey Work

1. Overview of the Scientific Achievements

- SHARE has issued a new data release of Waves 1 through 4 to the SHARE users in November 2012, and released a new simplified data set for training during the fourth international user conference in November 2013. This has boosted the official user registration numbers of SHARE to more than 3500. Details are described in Section 2.
- SHARE has published a book on the first results of Wave 4 (Börsch-Supan et al. 2013b) with a workshop in Brussels on 27 June 2013. The results on active ageing, solidarity between generations, and socio-economic status after the crisis are summarized in Section 3.
- SHARE has ended the fieldwork of Wave 5 in November 2013. Section 4 describes the fieldwork progress.
- SHARE has finished the preliminary design of the Wave 6 questionnaire. Major innovation is the collection of dried blood spots from our respondents to better understand the socio-economic causes and effects of diabetes and other frequent medical conditions. The preliminary design will be tested in a pilot in March, then optimized for the pretest in June. Section 5 gives an overview.

2. Wave 1-4 Data Dissemination and Data Usage

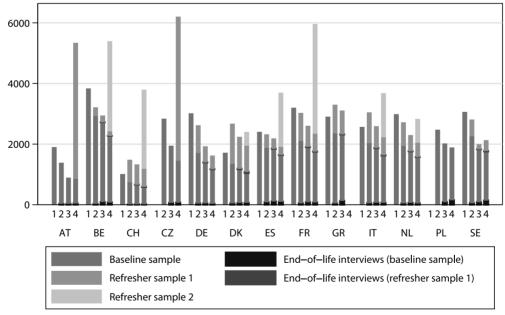
SHARE is a unique panel database of micro data on the health, socio-economic status and social and family networks of respondents aged 50 and older covering most of the European Union and Israel (Börsch-Supan et al. 2013a). SHARE is closely harmonized with several studies worldwide, most closely with the HRS (USA), TILDA (Ireland) and ELSA (England). The network of harmonized global ageing studies also includes four Asian countries (China, Korea, Japan, and India) and three Latin American countries (Mexico, Brazil and Argentina).

To date, SHARE has collected three panel waves (2004, 2006, 2010) of current living circumstances and one wave of retrospective life histories (2008, SHARELIFE); 6 additional waves are planned until 2024. Since the release of the Wave 4 data in November 2012 (see http://www.share-project.org/home0/wave-4.html for details), SHARE provides data which has been generated by more than 150.000 interviews in 19 countries to the scientific commu-

nity free of charge. In Wave 5, Luxembourg will join as the 20th country.

A comprehensive overview of all available data is given in the SHARE "data resource profile" which has been authored by the central coordination team and published in April 2013 open access by the International Journal of Epidemiology (Börsch-Supan et al. 2013a, available online via http://ije.oxfordjournals.org/content/early/2013/06/18/ije.dyt088. short).

Figure 1 shows the sample sizes by country and wave. On average, the sample size per country is about 4000; the target size – depending on funding – is 6000 respondents. This number is motivated by three very different phases in the age range after 50 (50-65: preretirement; 65-80: healthy retirement; 80+: onset of illnesses) and a sample size of about 1000 for each gender. Note that Greece dropped from SHARE due to the economic crisis.



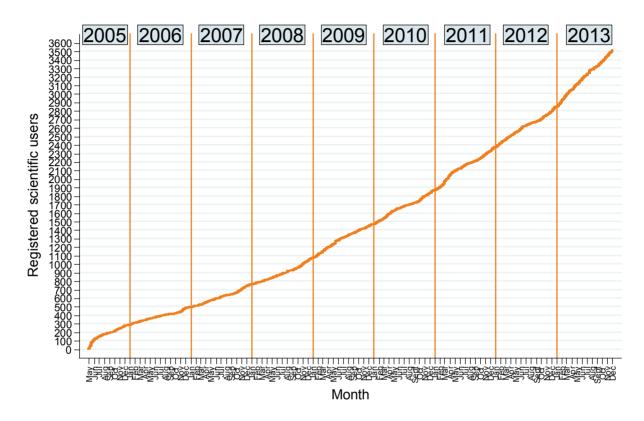
In addition the baseline samples of the first data collections in Estonia (N = 6828), Hungary (N = 3076), Ireland (N = 1134), Israel (N = 2598), Portugal (N = 2080), and Slovenia (N=2756) are released. AT: Austria, BE: Belgium, CH: Switzerland, CZ: Czechia, DE: Germany, DK: Denmark, ES: Spain, FR: France, GR: Greece, IT: Italy, NL: Netherlands, PL: Poland, SE: Sweden

Figure 1: Overview of released samples (November 2012)

Source: Börsch-Supan et al. 2013

By December 2013, SHARE has more than 3500 officially registered data users coming from all over the world, see Figure 2. Most of the users are from European countries as detailed in Figure 3. Note that the increase in

user registrations is more than proportional: each new wave is more valuable to the users than the previous waves. This has a scientific reason since ageing needs to be studied in its development over time.



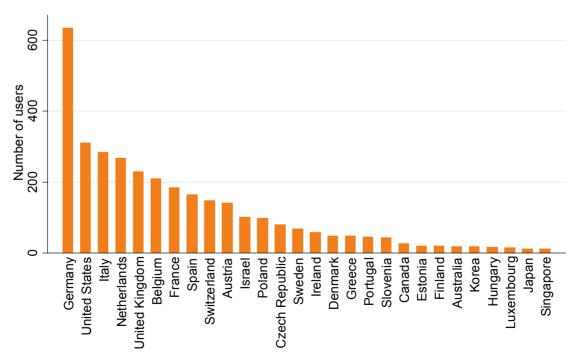


Figure 2: Number of registered users over time
Figure 3: Number of registered users by country background, only countries with >10 users
Source Figure 2 & 3: SHARE website, December 2013

Much effort has been put into documenting SHARE's survey methods as well as innovations such as the first cross-nationally comparable social networks module, linkage to administrative data of the German pension fund, collection of new biomarkers (dried blood spots, height, waist circumference, and blood pressure) and nonresponse experiments. They are described in detail in an accompanying methods volume which has been published in November 2012 (Malter 2012, available online via http://www.share-project.org/fileadmin/pdf_documentation/Method_FRB_FINAL_AT_note.pdf).

Moreover, SHARE has provided a detailed documentation of the available data sets on the SHARE website: http://www.share-project.org/data-access-documentation/documentation0. html. Additionally, all information was sent to the SHARE community via e-mail newsletters (http://www.share-project.org/general-information-news/newsletter.html).

SHARE has also spent considerable time in not only providing tailored user support via e-mail and regular newsletters, but also on our efforts to stay in close contact with our users and learn about their ongoing research. In addition to our SHARE working paper series (http://www.share-project.org/publications/ share-working-paper-series.html) centrally edit several special issues and organize regular user conferences in order to stay in close exchange with users. The fourth international SHARE user conference which was held in Liège, Belgium, in November 2013 was a great success with more than 100 researchers presenting their recent work and discussing with an international interdisciplinary scientific community: http://www.share-project.org/ home0/news/article/share-user-conference. html. During this conference we also celebrated the release of a new simplified training data set which is now available via http://www. share-project.org/data-access-documentation/ easyshare.html. Moreover, we have presented and discussed research based on the SHARE data at a plethora of conferences worldwide (see our regular newsletters for more details).

In accordance with the growing user community, the number of publications based on the SHARE data increased more than linearly, amounting to over 850 publications overall and around 300 Social Science Citation Indexranked articles. An overview of all SHARE based publications is available on our website: http://www.share-project.org/publications. html. A selection of the most recent publications is given in Table 1. It provides a good impression of the breadth of the inter- and multi-disciplinary scientific work that has become possible thanks to the SHARE data.

Table 1. Selected New Publications 2013

- Blom, A. and J.M. Korbmacher. (2013). Measuring interviewer characteristics pertinent to social surveys: A conceptual framework. Survey Methods: Insights from the Field.
- Bíró, A. (2013). Adverse effects of widowhood in Europe. Advances in Life Course Research 18(1): 68-82. DOI: 10.1016/j.alcr.2012.10.005.
- Bíró, A. (2013). Subjective mortality hazard shocks and the adjustment of consumption expenditures. Journal of Population Economics 26(4): 1379-1408. DOI: 10.1007/s00148-012-0461-5.
- Börsch-Supan, A., M. Brandt and M. Schröder (2013). SHARELIFE One century of life histories in Europe. Advances in Life course Research 18(1): 1-4. DOI: 10.1016/j.alcr.2012.10.009.
- Börsch-Supan, A., Brandt, M., Hunkler, C., Kneip, T., Korbmacher, J., Malter, F., Schaan, B., Stuck, S. and Zuber, S. (2013). Data Resource Profile: The Survey of Health, Ageing and Retirement in Europe (SHARE). International Journal of Epidemiology DOI: 10.1093/ije/dyt088.
- Bordone, V. and A. Rosina. (2013). The role of education in the reconciliation between female occupation and family responsibilities at mid-life: the Italian case. Journal of Population Research 30(1): 39-65. DOI: 10.1007/s12546-012-9091-8.
- Brandt, M. (2013). Intergenerational help and public support in Europe. A case of specialization? European Societies 15(1): 26-56. DOI: 10.1080/14616696.2012.726733.
- Brandt, M. and C. Deindl. (2013). Intergenerational transfers to adult children in Europe: Do social policies matter?. Journal of Marriage and Family 75(1): 235-251. DOI: 10.1111/j.1741-3737.2012.01028.x.
- Brugiavini, A., G. Pasini and E. Trevisan. (2013). The direct impact of maternity benefits on leave taking: Evidence from complete fertility histories. Advances in Life Course Research 18(1): 46-67. DOI: 10.1016/j.alcr.2012.10.003.
- Cavapozzi, D., E. Trevisan and G. Weber. (2013). Life insurance ivestment and stock market participation in Europe. Advances in Life Course Research 18(1): 91-106. DOI: 10.1016/j. alcr.2012.10.007.
- Chen, M.K. (2013). The effect of language on economic behavior: Evidence from savings rates, health behaviors, and retirement assets. American Economic Review 103(2): 690-731. DOI: 10.1257/aer.103.2.690.
- Deindl. C. (2013). The influence of living conditions in early life on satisfaction in old age. Advances in Life Course Research 18(1): 107-114. DOI: 10.1016/j.alcr.2012.10.008
- Gallagher, D., G.M. Sawa, R. Kenny and B.A. Lawlor. (2013). What predicts persistent depression in older adults across Europe? Utility of clinical and neuropsychological predictors from

- the SHARE study. Journal of Affective Disorders 147: 192-197. DOI: 10.1016/j.jad.2012.10.037.
- Hank, K. and J. M. Korbmacher. (2013). Parenthood and retirement Gender, cohort, and welfare regime differences. 15(3): 446-461 DOI: 10.1080/14616696.2012.750731.
- Hochman, O. and N. Lewin-Epstein. (2013). Determinants of early retirement preferences in Europe: The role of grandparenthood. International Journal of Comparative Sociology 54(1): 29-47 DOI: 10.1177/0020715213480977.
- Hochmann, O. and N. Skopek. (2013). The impact of wealth on subjective well-being: A comparison of three welfare-state regimes. Research in Social Stratification and Mobility 34: 127–141. DOI: 10.1016/j.rssm.2013.07.003.
- Lyberaki, A., P. Tinios and G. Papadoudis. (2013). Retrospective explanation of older women's lifetime work involvement: Individual paths around social norms. Advances in Life Course Research 18(1): 26-45. DOI: 10.1016/j.alcr.2012.10.002.
- Lyberaki, A., Tinios, P., Mimis, A. and Georgiadis, T. (2013). Mapping population aging in Europe: how are similar needs in different countries met by different family structures?.
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- Paccagnella, O., V. Rebba and G. Weber. (2013). Voluntary private health care insurance among the over fifties in Europe: A comparative analysis of SHARE data. Health Economics 22: 289-315 DOI: 10.1002/hec.2800.
- Reinhardt, J.D., M. Wahrendorf and J. Siegrist. (2013). Socioeconomic position, psychosocial work environment and disability in an ageing workforce: A longitudinal analysis of SHARE data from 11 European countries. Occupational and Environmental Medicine 70: 156-163. DOI: 10.1136/oemed-2012-100924.
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alcr.2012.08.001.

- Wahrendorf, M., D. Blane, M. Bartley, N. Dragano and J. Siegrist. (2013). Working conditions in mid-life and mental health in older ages results from SHARELIFE. Advances in Life Course Research 18(1): 16-25. DOI: 10.1016/j.alcr.2012.10.004.
- Wahrendorf, M., J.D. Reinhardt and J. Siegrist. (2013). Relationships of disability with age among adults aged 50 to 85: Evidence from the United States, England and Continental Europe. PLOS ONE 8(8). DOI: 10.1371/journal.pone.0071893.

3. Wave 4 First Results Published in June 2013

The SHARE data give a broad picture of important aspects of life after the age of 50 years, measuring physical and mental health, economic and non-economic activities, income and wealth, transfers of time and money within and outside the family as well as life satisfaction and well-being.

We widely distributed a new SHARE brochure which gives a comprehensive overview of SHARE key results across all waves and instructs potential new users how to access the data (http://www.share-project.org/fileadmin/SHARE_Brochure/share_broschuere_web_final.pdf), see Figure 4.

The launch of our new open access book "Active ageing and solidarity between generations in Europe: First results from SHARE after the economic crisis" (download via http://www.degruyter.com/view/product/185064) based on the Wave 4 data, see Figure 4, was

celebrated at an event in Brussels, 27 June 2013. Guest speakers included high-level representatives by the European Commission's DG Research & Innovation, DG Employment, Social Affairs & Inclusion and DG Health & Consumers as well as the German Ministry of Education and Research and the Max Planck Society. The speeches acknowledged that the economic crisis poses serious challenges for Europe's economic and social future. These new challenges - which will remain difficult for guite some time – come in addition to the well-known but so far only partially addressed challenges exerted by population ageing. Finding policy responses in this situation requires the availability of solid scientific evidence, dealing with the interplay of several interrelated factors such as the financial and social situation as well as physical and mental health.



Figure 4. New brochure and open access book wave 4



The new SHARE publication delivers such insights from the lives of people fifty and over in 16 European countries. International authors from the four different sections of the book (economics, retirement, health, social networks) presented a selection of the main findings, which are summarized in the following.

Europe is still divided in many respects

- Many older people have little wealth, especially in Southern and Eastern European countries. These individuals lack the buffer necessary to sustain economic shocks such as those caused by the crisis. Poverty is highest in Eastern Europe and in the Mediterranean countries, correlating strongly with the deterioration of a broad set of measures describing the quality of life.
- Poor health is more common in Eastern European countries. The SHARE data show that institutional differences (e.g. in education, income support and health care provision) have a major impact on health disparities. They must be addressed to increase healthy – and therefore also active – ageing in Europe.
- With government finances under pressure, family and non-family help becomes more important. There are, however, large regional differences in intergenerational and peer solidarity in Europe. People in the North have the diverse social networks, while those in the East and South rely more on the family.

The crisis hit frail older people most

 The effect of the crisis on health and wellbeing is stronger in regions that experienced a larger economic slowdown. Financial distress especially increased in Southern and Eastern Europe. Individuals with low education, low income, poor health and single females were particularly affected.

- The crisis was associated with a reduced likelihood of retirement: many individuals responded to the economic pressures of the crisis by working longer. In addition, financial assets were liquidated during the crisis when incomes declined.
- The crisis has negative effects on old-age health. This is particularly pronounced in areas with rising unemployment. In addition, unemployed aged 50 and over exhibit a substantially elevated risk of depression.

Family and friends play a crucial role in reducing adverse effects

- The availability of nursing homes and the supply of residential care vary considerably across Europe. The role of the family is crucial, as co-residing with children is a much needed substitute for government and community support in many European countries.
- Older Europeans continue to be 'givers' rather than 'receivers' of support. Caring for grandchildren increases the likelihood to receive help from adult children later in life. Social relationships, such as with friends, family or having a partner and participation in social activities lead to a reduction of symptoms of depression. Policies that enhance social participation thus may prevent late life depression.
- Active and healthy ageing is associated with larger and more intense social networks and, more generally, social cohesion on the country level.
- While the economic crisis affected the lives of older Europeans on many levels and in many dimensions, the design of institutions and social policies play a significant role in alleviating negative impacts. Much can be learned in this respect from international comparisons. Additionally, the role of family and friends is vital. They not only

reduce the negative effects of the current crisis, but also create a positive support network in old age which fosters active and healthy ageing. The agenda and more impressions from the book launch can be found at http://www.share-project.org/home0/news/article/share-wave-4-book-launch.html.

4. Wave 5 Fieldwork Ends in November 2013

The following section displays accomplishments until the official end of data collection of wave 5 on 30 November 2013. We begin with the panel samples. Figure 5 below shows household contact rates broken down

for countries. This contains contact attempts which resulted in an actual contact. By definition, this may also include households with at least one complete interview.

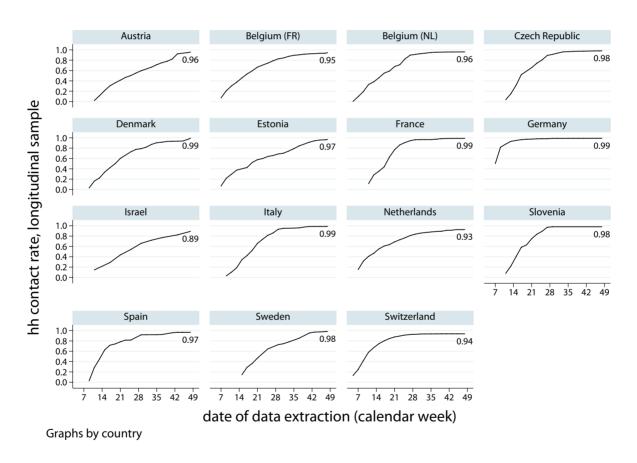


Figure 5. Contact rate of panel households by country

It can be seen that most countries achieved high contact rates above 95 percent.

Figure 6 shows the individual retention rate of subsamples A and B. Participants of these households have participated in the previous

wave. SHARE stipulates at least 80 percent of respondents in these two subsamples combined be brought back in the current wave. Survey agencies are incentivized for rates exceeding 80 percent.

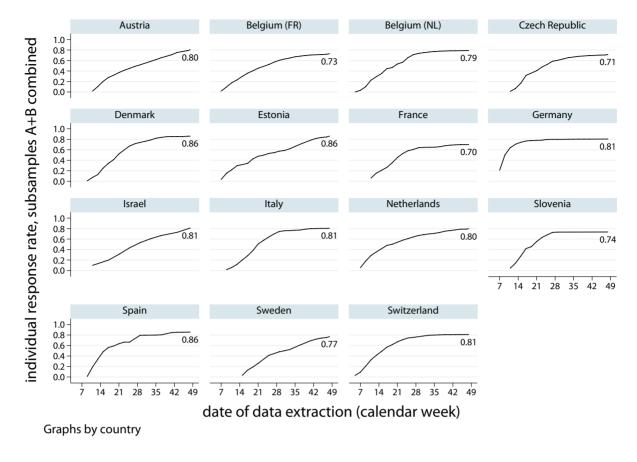


Figure 6: Individual retention rates in subsamples A and B by country

It can be seen that countries vary in their ability to bring back respondents of the previous waves. It has to be noted, though, that the starting point is quite different for each country. For example, France had a large baseline sample in the fourth wave. For these respondents, the fifth wave was actually their second wave. It is well known that the largest drop-out rates in panel respondents occurs between their first wave and second wave.

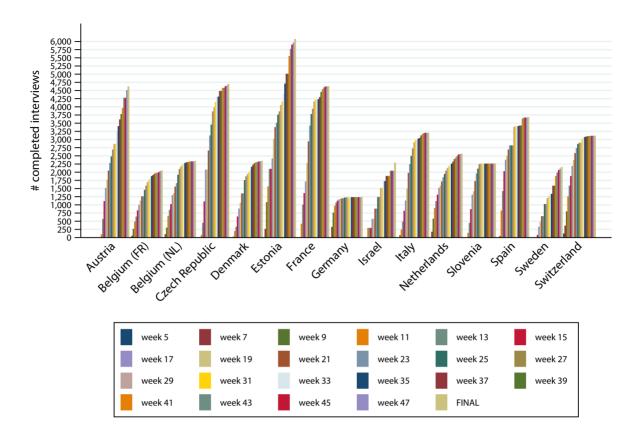


Figure 7: Absolute number of panel interviews over time

Figure 7 above shows that panel samples also varied substantially in absolute size. Germany - for example – collected roughly 1250 panel interviews and Estonia collected about 6000 interviews.

Refreshment samples were taken in 11 countries. Figure 8 below shows the rate of refreshment households that were actually contacted by an interviewer as of end of November 2013, i.e. where a contact attempt resulted in a contact. By definition, this also includes households with at least one complete interview.

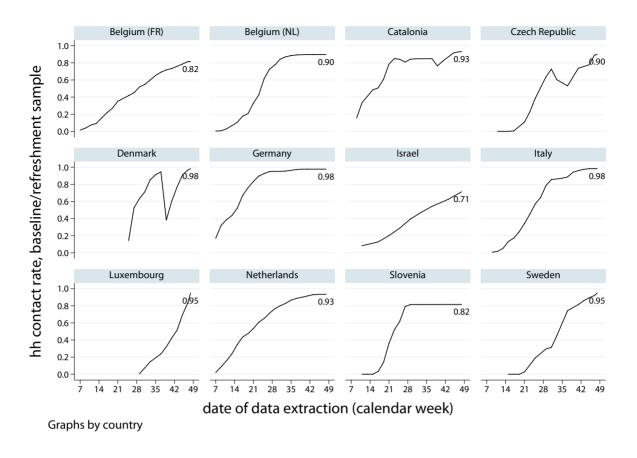


Figure 8: Contact rate of refreshment/baseline households by country

Outcomes were (expectedly) lower than in panel samples which are usually easier to contact due to their experience of the preceding wave.

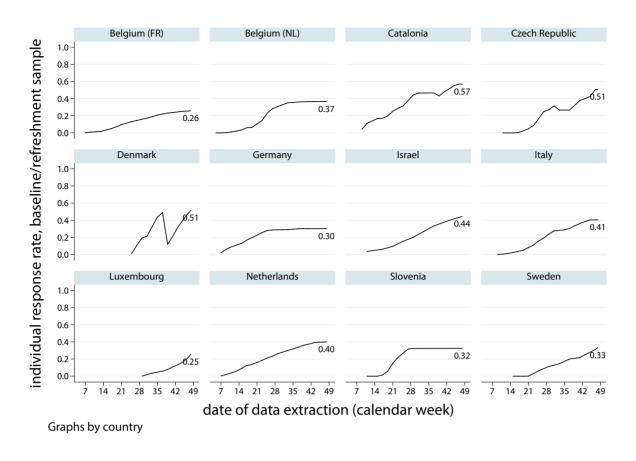


Figure 9: Individual response rate of refreshment/baseline samples by country

As Figure 9 shows, there was considerable variation in individual response rates: the lowest rate was found for Luxembourg and the highest rate was found for a municipality in the region of Catalonia in the Southeast of Spain. The "up-and-down" in the Czech Republic and Denmark can be explained by their ex-ante planned adding of new households to the existing sample (so-called "replicates"). This is a common measure in household surveys for simultaneous optimization of response rates and total number of interviews.

The graph below shows the progress of field-work of baseline and refreshment samples in terms of absolute number of interviews.

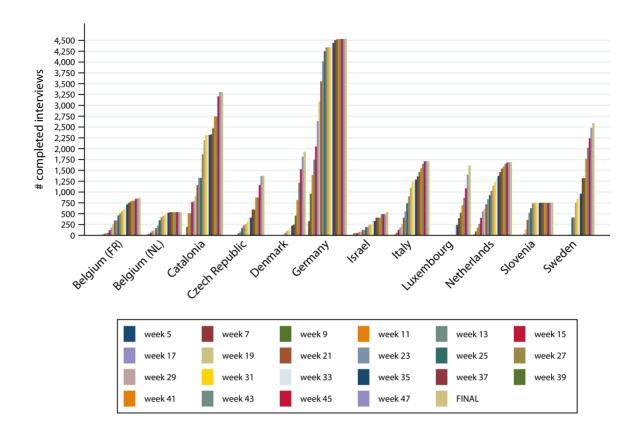


Figure 10: Total number of interviews in baseline/refreshment samples

Similarly to numbers of the panel samples, countries differed widely with respect to absolute number of interviews in their baseline/refreshment samples. Germany collected the largest absolute number of refreshment interviews.

5. Wave 6 Questionnaire Update

Cross-wave overview

Although panel surveys strive to maintain questionnaire content identical across waves (to allow for comparisons over time), there are at least two reasons for changing questionnaire content between waves. One reason is researchers' desire to add new content, e.g. in response to current or anticipated societal challenges. The second reason is improving the quality of existing content.

This can become necessary if issues were identified with respect to cross-national applicability or translatability of survey items, changes in institutional settings that necessitate adapting the respective survey items, or technical issues. In order to be able to track the deviations between waves easily, an overview of the generic English-language versions of the guestionnaires in Wave 1, Wave 2, Wave 4, and Wave 5 was developed and has been released to the SHARE user community in July 2013 to facilitate longitudinal analyses. This overview contains the comparison of question texts, response options and interviewer instructions in the main questionnaires. Furthermore, it illustrates changes in the generic drop-off-questionnaires and movements from drop-off to the CAPI questionnaire. We have used this overview extensively in the discussions about what items could be changed for Wave 6.

Review of the economics and pensions module

Several iterations have been conducted between the involved parties under leadership of Prof. Guglielmo Weber at Padua University and numerous changes and cuts were decided to reduce the burdensomeness of the modules and improve the conversational flow of the modules. To give one example, we will be piloting a new automated coding of occupational

categories based on the latest research by ISCO experts. In practice, respondents will state their occupation in their own words and an autocomplete mechanism will suggest a number of standardized occupational categories upon the interviewer's entering of the first few letters, much like the google auto-complete function. The interviewer will then confirm with the respondent, which suggested category makes for the best match.

If successful in the pilot runs, this will be a very efficient way of coding occupational categories in congruence with an internationally harmonized standard.

Social networks module

The social networks module was introduced in wave 4 but was not part of wave 5. In wave 6, it will be reintroduced. The expert group under the leadership of Prof. Howie Litwin at Jerusalem University has adapted to the longitudinal version and re-connected to related modules that receive feed-forward information from this module. In detail, information from the children module, the financial transfer module and the social support module have been intertwined with the social networks module, in a similar fashion than in wave 4. As an example, if a child gives social support to a respondent and is given financial support by the respondent, it must be possible to identify the child if she or he is also mentioned in the social network module, i.e. if that child was mentioned by the respondent as being an important confidant.

Furthermore, if somebody was mentioned in wave 4, it is necessary to know whether it is the same person mentioned again in wave 6. First test runs with preliminary programmed versions were conducted in 2013, but the majority of testing will be conducted in 2014.

Translation review

SHARE Central commissioned a review of all translations of the wave 5 survey. The contract of verifying existing translations was awarded to the company Capstan in Brussels, a business with wide-ranging expertise in translating and verifying surveys of the social sciences. The output of the verification process part of the aforementioned improvements of survey wording

Dried blood spots

Another major innovation in wave 6 will be the collection of dried blood spots (DBS) from respondents which have been interviewed at least once before. The SHARE questionnaire board decided at its meeting in November 2013 not to take DBS from respondents who will be interviewed the first time as baseline interviews are already longer than longitudinal interviews. In 2013, major progress has been made to sort out the unresolved legal, ethical and operational details arising from the standardized collection of DBS in a crossnational setting like SHARE.

Due to large differences in legal and ethical regulations between SHARE countries, these have to be resolved in each country separately. Due to legal restrictions the collection of DBS by trained interviewers will not be possible in the Czech Republic and Austria. In Poland, where only medical personnel may collect DBS, this issue could be solved by employing nurses for the DBS collection. All countries participating in wave 6 (except CZ and AT) are applying for ethics committee approval and consulting all other relevant authorities in compliance with national law. At the time of writing (January 2014), ethics committee approval has been obtained for wave 6 in Estonia, Israel and Slovenia; in Belgium, Germany and Denmark approval has been obtained in wave 5 and is being renewed currently. In Italy, DBS will only be collected from a small subsample due to the complex ethics review system that is organized at municipality level. All countries are expected to receive approval from the responsible regional/national ethics committee/s for the entire DBS collection prior to the start of the pretest of wave 6 in June 2014.

The integration and process management, i.e. providing generic documentation and synthesizing feedback from countries, is done by SHARE Central. Likewise, the CAPI module for dried blood spots is currently revised in order to reflect these country differences. Several versions will be available and applied according to the national ethical requirements, e.g. whether information about the upcoming blood sample collection is sent to respondents in advance or whether feedback is given about the individual blood results after centralized analyses have been conducted. In each case the interview text that the interviewer has to read out loudly has been changed in order to follow as close as possible the flow of a natural conversation. In addition, more explicit interviewer instructions are given to make the blood collection as easy as possible. All this helps to improve the consent rate on the one hand and the quality of the samples on the other.

6. References and Further Reading

Börsch-Supan, A., M. Brandt, C. Hunkler, T. Kneip, J. Korbmacher, F. Malter, B. Schaan, S. Stuck, and S. Zuber. (2013a). Data Resource Profile: The Survey of Health, Ageing and Retirement in Europe (SHARE). International Journal of Epidemiology: 1-10. DOI: 10.1093/ije/dyt088.

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B. Operational Aspects of the SHARE-ERIC

1. SHARE-ERIC Council Meetings/ Amendments of the SHARE-ERIC Statutes

During the reference period of that report two meetings of the SHARE-ERIC Council took place at the premises of the Munich Center for the Economics of Aging, in Munich. All SHARE-ERIC members were present and most of the non-ERIC SHARE participants as observers.

On the 21 September 2012 it was agreed that the SHARE-ERIC statutes should be amended:

- To make it easier for countries to accede to the SHARE-ERIC even if they cannot, at this point, provide a guarantee for long-term funding (Articles 6 and 9).
- To give the area coordination of health care a more prominent role in the management board (Article 7)
- To change the seat from its temporary to its permanent location (Articles 2 and 13) when the legal conditions in Germany are met;
- To clearly define the ownership of the SHARE data (Articles 11 and 12)

On 8 May 2013 the amendments a and b were submitted to the Commission according to Art. 11 Nr. 2 of the Council Regulation (EC) No 723/2009 of 25 June 2009. On 03 July 2013 the Commission agreed explicitly to these amendments.

On the 10 September 2013 the Council agreed to ask the Commission for the approval of c) and d). The decision of the Commission according to Art. 11 Nr. 1 of the Council Regulation (EC) No 723/2009 is expected for the beginning of 2014. In addition the Council accepted the accession of three new members: Greece, Israel and Slovenia.

2. Changes in the Scientific Partner Organizations

In France, the Laboratory of Economics and Management of Health Care Organisations LEGOS at Université Paris-Dauphine replaced IRDES on 1 January 2013. New country team leader is Professor Marie-Eve Joel, PhD., specialized in the Economics of Ageing. On 16 January 2013, SHARE Central received the formal application of the new partner institution in Luxembourg, CEPS/INSTEAD on behalf of the Scientific Monitoring Board. In their meeting of 18 January 2013, the SMB approved of the application that demonstrated the institution's ability to conduct a complex survey operation like SHARE. With this, Luxembourg was the 20th country to join SHARE. The country team leader of Luxembourg is Dr. Maria Noel Pi Alperin, the country team operators are Gaetan de Lanchy and Nathalie Lorentz. CEPS/INSTEAD is located in Eschsur-Alzette, south-west of Luxembourg City. We hope that both France and Luxembourg will join the ERIC as soon as possible.

C. Financial Aspects

Funding

The entire SHARE operation costs about €11m per annum for all 20 countries which are participating in SHARE of which 9 are currently SHARE-ERIC members. These costs have four components, see Figure F11:

- The largest component (about €8m) is running the survey in each SHARE country.
- International coordination has two components:
 - o First, the international coordination activities which take place at the Munich headquarter (about €1.15m annually) are covered by a grant from the Federal Ministry for Research and Education (BMBF), the German Science Foundation (DFG) and the Max Planck Society (MPG) until 2018.
 - o Second, all other international coordination activities which take place in Den mark, France, Israel, Italy and the Netherlands (about €1.25m annually) are co vered by the EU Commission through a FP7 grant ("SHARE-M4") until end of 2014.
- Finally, several other grants (FP7, US National Institute on Aging; totaling about €0.7m per annum) finance innovation and harmonization activities.

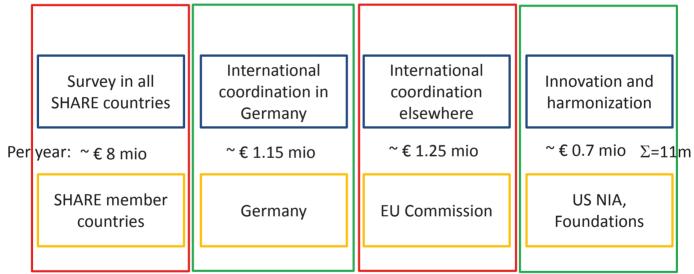


Figure 11: Components of the entire SHARE operation costs

While the funding situation for SHARE is stable in some countries, it is fragile in many other countries for a variety of reasons, see Figure F12. In the new host country, Germany, a generous medium-term agreement could be reached between the Federal Ministry for Research and Education (BMBF), the German Science Foundation (DFG) and the Max Planck Society (MPG) which secures the financing of the German survey until mid 2018 on the level since 2011. Funding is also secured for the medium term in the Czech Republic. Most other countries have short-term funding for one or two waves. In the Netherlands, a funding decision for waves 6 and 7 is expected only in June 2014, even though the preparations for wave 6 have started in January 2014. In Greece, Portugal and Spain, however, serious funding difficulties were encountered due to the austerity measures precipitated by the economic and debt crisis. We were able to rescue the survey in these countries due to national and EU structural funds, but only in one wave (Spain only in wave 5, Greece and Portugal only in wave 6).

Greece thus missed both wave 4 and wave 5, when most of the economic downturn happened. Spain has currently no funding for wave 6. In Hungary, a mixture of financial and political restrictions appears to make a second wave in this country impossible. In Denmark, the Research Council for the Social Sciences made a strategic decision not to fund any data collection. We were able to save the Danish data collection in wave 5 with the use of a grant provided by the US-American National Institute on Aging (NIA) but these funds are exhausted for wave 6. France has secured partial funding for about a third of the budget, the remainder is still open. This fragile funding situation makes both financial and operational planning very difficult. The resulting inefficiency is an impediment for the scientific tasks of SHARE.

Year	2004-05	2006-07	2008-09	2010-11	2012-13	2014-15	2016-17
Wave	1	2	3 (LIFE)	4	5	6	7
1. DE	x	x	x	x	x	x	х
2. DK	×	X	X	X	r		
3. FR	×	X	X	X	X	n	
4. GR	×	X	X			r	
5. IT	×	x	x	x	х	х	×
6. NL	×	x	x	x	х	n	n
7. ES	x	x	x	x	r		
8. SE	×	X	X	X	х	х	×
9. CH	x	x	x	x	х	х	х
10. AT	x	x	x	x	х	х	n
11. BE	x	x	x	x	х	х	
12. IL		x		x	х	х	
13. CZ		x	x	x	х	х	х
14. PL		x	x	r		n	
15. IE		x	x				
16. EE				X	X	х	
17. PT				X		n	
18. HU				X			
19. LU					х	х	
20. SI					x	х	
financed	11	15	14	15	13	11	5
rescued	0	0	0	1	2	1	0
negotiation	0	0	0	0	0	4	2

Figure 12: Funding situation of SHARE waves

International coordination outside of Munich is not funded after 2014. A seamless continuation of the FP7 grant ("SHARE-M4") is not possible for two reasons. First, the call dates of Horizon2020 are too late for an immediate continuation; second, it is unclear at this stage which calls are eligible for participation of the SHARE infrastructure.

Only a small part of the SHARE funding is flowing through the SHARE-ERIC. A detailed overview of the finances of the SHARE-ERIC is provided in Figures F13 and F14. Figure F13 shows the collection of funds from member countries (€1.876m) and grants (€1.407m) in 2013, and the initial survey expenses (e.g., pilot and pretest) of wave 6 plus some remaining expenses of wave 5 (€1.742m) plus other minor expenses in 2013. Note that the main expenses for wave 6 (€3.778m) are due in 2014, see Figure F14, which neutralizes the balance at the end of year 2013.

Summary		13			
GRAND TOTAL (EUR+CZK account)					
Туре	Code	Debit	c	redit	Balance
INITIAL BALANCE					1.155.540,23
CC: Country Contributions acc. to Art.9	CC		0,00	1.876.339,11	1.876.339,11
GC: Grants & contracts	GC		0,00	1.407.831,18	1.407.831,18
MF: Membership fees	MF		0,00	36.831,54	36.831,54
II: Interest income	II		0,00	0,00	0,00
VA: VAT reimbursement	VA		0,00	310,00	310,00
SV: Survey costs	SV		1.742.029,54	0,00	-1.742.029,54
PE: Personnel costs	PE		0,00	0,00	0,00
TV: Travel costs	TV		8.070,82	0,00	-8.070,82
MA: Materials costs	MA		11.478,90	140,00	-11.338,90
AC: Account charges	AC		764,56	0,00	-764,56
SC: Other subcontracts	SC		11.943,28	0,00	-11.943,28
XX: unknown, not yet categorized	XX		10.824,23	11.450,61	626,38
TOTAL FLOWS			1.785.111,33	3.332.902,44	1.547.791,11
END BALANCE					2.703.331,34

Figure 13: Collection of funds from member countries

Summary		14			
GRAND TOTAL					
Туре	Code	Debit	С	redit	Balance
INITIAL BALANCE					2.703.331,34
CC: Country Contributions acc. to Art.9	CC		29.512,18	2.247.000,00	2.217.487,82
GC: Grants & contracts	GC		0,00	0,00	0,00
MF: Membership fees	MF		0,00	29.308,80	29.308,80
II: Interest income	II		0,00	0,00	0,00
VA: VAT reimbursement	VA		0,00	0,00	0,00
SV: Survey costs	SV		3.778.569,00	0,00	-3.778.569,00
PE: Personnel costs	PE		0,00	0,00	0,00
TV: Travel costs	TV		10.000,00	0,00	-10.000,00
MA: Materials costs	MA		100.000,00	0,00	-100.000,00
AC: Account charges	AC		1.000,00	0,00	-1.000,00
SC: Other subcontracts	SC		421.000,00	0,00	-421.000,00
XX: unknown, not yet categorized	XX		0,00	0,00	0,00
TOTAL FLOWS			4.340.081,18	2.276.308,80	-2.063.772,38
END BALANCE					639.558,97

Figure 14: Expenses for wave 6

Annex: Scientific Partners of SHARE-ERIC

Country	Participating Organisations	Short Description		
Austria	University of Linz, Dept. of Economics	The Department of Economics at the University of Linz directs the Austrian participation in the SHARE project. Its research focus being is labour economics, public economics and problems of pension reform as well environmental economics. It will be represented by the Rudolf Winter-Ebmer, Professor of Economics and specialist in empirical labour economics.		
Belgium	University of Antwerp, CSP	CSP's principal objective has been to study the adequacy of social policies. Its research is mainly based on large-scale socio-economic surveys of households. Karel van den Bosch, senior researcher, leads the Belgian country team.		
Belgium	University of Liège, CREPP	CREPP's main fields of specialisation are social security, retirement behaviour, and well-being among the elderly and intergenerational transfers. Sergio Perelman is in charge of the SHARE project coordination in the Belgian French speaking community.		
Czech Rep.	CERGE-EI, Prague	CERGE-EI is fully accredited in both the Unted States and the Czech Republic. Its maje expertise is in social, economic and politic transition in the Central and Eastern European countries and in the former Soviet Unon region. Radim Bohacek leads the Czec country team.		
Germany	Max Planck Institute for Social Law and Social Po- licy, Munich Center for the Economics of Aging (MEA)	MEA is a world-renowned centre of excellence for the economics of ageing. It moved 2011 from Mannheim to Munich after an offer to become part of the Max Planck Society. Research areas are savings, social in-		

surance and public policy; macroeconomic implications of population ageing; and pu-

blic health. MEA has been the coordination center of SHARE since its first wave. MEA is represented by Axel Börsch-Supan, director, who has coordinated the SHARE family of projects.

Greece Panteion University,

Athens

Panteion University is a public institution centering on social and political sciences. Economics, sociology, social anthropology and psychology are major disciplines while regional development & public administration are interdisciplinary departments where cross-cutting viewpoints from many disciplines met. Antigone Lyberaki leads the Greek country team.

Israel The Hebrew University,

IGDC

The Israel Gerontological Data Center at the Hebrew University in Jerusalem facilitates research and dissemination of data on aging, and directs the Israeli participation in the SHARE project. Howard Litwin leads the Israeli country team. He also serves as area coordinator of the social network area in SHARE.

Italy University of Padua,

Dept. of Economics

Padua's Department for Economics and Management covers the whole spectrum of economics and management science, in particular applied econometrics, public and health economics as well as labour economics. Guglielmo Weber leads the Italian country team. He also serves as deputy coordinator of SHARE.

The Netherlands University of Tilburg, Net-

spar

Netspar is a scientific Network for studies on Pensions, Aging and Retirement connected to the Faculty of Economics and Business Administration of Tilburg University. Arthur van Soest leads the Dutch SHARE country team.

Slovenia Institute for Economic

Research Ljubliana (IER)

country team

The Institute for Economic Research (IER) is the leading institute for macroeconomic research in Slovenia, which recently focuses particularly on economic, social and health aspects of structural reforms in Slovenia. Boris Majcen leads the Slovenian country team.















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