



HRS Health and Retirement Study

Winter 2003 Participant Newsletter

STUDY NEWS

Thank You: *Have we told you how much we enjoy working with you?*

Thank you for a successful 2002 HRS. It turns out that one of the main reasons that our interviewers like the HRS is because they really enjoy working with you – the HRS participants. So, thank you not only for the information that you provided in 2002, but also for making the interviewing fun. Because of your generosity, we can continue to provide policymakers and researchers with an up-to-date picture of how things are going for you and for other Americans over 50.

Welcoming HRS to the Internet Since the HRS began in 1990, the Internet has become an important part of many people's lives. As a result, we have taken some steps to use the Internet to make it easier for you to participate in the HRS.

Introducing a Web Page for HRS Participants We have always welcomed HRS participants to visit our website.

However, in the past, the site was mostly intended for researchers. Since more and more mature people in the United States are getting access to the Internet, we added a special section to our website just for you. It includes many great features, such as:

- A list of some of the questions you ask us most – and answers to those questions
- Back issues of HRS Participant Newsletters
- Links to HRS press releases and the HRS web page for researchers

We hope that you will visit our Participant web page at <http://hrsparticipants.isr.umich.edu>.

Would you like to be able to answer our questions on the Internet someday? Right now, most of you provide your information over the telephone. Others of you give your information to an interviewer who visits you in person.

Many of you will always prefer to answer our questions the way you have in the past, but we are looking into giving you another option – the Internet. In 2003, we are starting a special project to assess the possibility of using the Internet for those participants who want to answer our questions on-line. See page 4 for more information about our ***Internet Project***.

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Letter from the Director

Dear Health and Retirement Study Participants:

It is with deep sadness that I inform you of the death of Dr. Regula A. Herzog, who was one of the founders of the Health and Retirement Study. Many members of the HRS staff worked closely with her and will miss her presence and generosity both on a personal and professional level. In her memory, I wanted to tell you about just a few of her many contributions to the HRS.

The HRS is a unique dataset, with tremendous potential for informing policymakers about the lives of older people in the United States. Through her intellectual leadership, broad vision and attention to detail, Dr. Herzog was responsible for many aspects of the HRS that make it such an extraordinary resource.

First, she was a key member of the team that won the original National Institute on Aging's funding in 1990. By then, it was clear that the older population in the United States was growing fast. Researchers had already projected that this growth would continue, so that, by 2050, the proportion of older people in the United States would be much larger than it is today. Dr. Herzog and others saw that high quality information about the situation of older Americans would be critical to policymakers during this growth. Their hope was that this information would help policymakers make better decisions about how to fully enjoy the advantages of people living longer lives and how to address the associated problems.

Much of the data collected by the HRS is financial in nature. However, some of the most important issues faced by older people are in other aspects of their lives, such as their health and families. Throughout our history, Dr. Herzog was one of the study's designers who most recognized the importance of some of these other aspects, especially health issues. She had chief responsibility for figuring out how to assess people's general happiness, their ability to remember and learn new things, and their physical ability to do life's basic tasks (like bathing, cooking, or balancing a checkbook). She was also critical in developing and improving our measures of physical health, such as how healthy people are overall and whether they suffer from chronic diseases (such as heart disease or diabetes).

In this issue of the newsletter, we have focused on some of Dr. Herzog's research. On page 7, you will find a discussion of some of Herzog's research on the benefits of volunteer and paid work. On page 9, you will find an article that discusses changes in people's cognition over time (that is, their ability to learn new things and to remember

In the days before Dr. Herzog died, she shared with me many of her hopes for the future direction of the HRS. Those shared hopes as well as her ideas and vision already embodied in the HRS form a lasting scientific legacy that will bear fruit far into the future.

Sincerely,



Robert J. Willis, Ph.D.
Health and Retirement Study Director

BEHIND THE SCENES

Collecting Information From Over 20,000 HRS

Participants Collecting information may sound simple, but when you are talking about getting detailed information from over 20,000 people, it is a pretty complicated task.

Who Are We? The most important resource we have on the HRS is our staff. You have already talked to at least one of our interviewers, but did you know that we have over 125 interviewers on staff? That doesn't even include their supervisors or the staff in our central office who are deciding what questions to ask, developing the computer systems, and working with the data.

Our staff are both dedicated and highly experienced. They work hard to make the interviews as easy as possible for you, to ensure that your privacy is protected, and to organize the data so that it is useful to researchers and policymakers.

Why We Do It The main reason that we are able to attract and maintain such excellent staff is because people think that the HRS is an important study. Our staff care a great deal about policies affecting older Americans.

They believe providing researchers and policymakers with accurate, high quality, up-to-date information about older people in the United States is critical to forming those policies.

How We Do It Every other year, we come out to talk to all 20,000+ of you about how you are doing. Each time we do, there are several important tasks that we need to accomplish:

Deciding Which Questions to Ask The directors of the study work together to select the most important issues to ask about.

Designing the Systems If you have completed an HRS interview in your home, you may have noticed that your interviewer entered the information you gave him or her on a computer. The HRS staff designed the computer program that goes on the computer. That system tells the interviewer which questions to ask and how to enter your information. There are other systems that organize and protect your data. All of these systems need to be updated each time we come to see you.

Selecting the Interviewing Staff We have a rigorous selection process and work hard to pick the very best interviewers. Once the interviewers are selected, they go through an intensive training process to assure that they are

well prepared to do the high quality work that we expect on the HRS.

Interviewing You Before we contact you, we always send you a letter to let you know that you will be hearing from an HRS interviewer soon. That way, you won't be surprised when one of our interviewers calls you or stops by to set up an appointment.

If the interviewer that you talked to last time is still working on the HRS, then that person will probably contact you again.

Otherwise, we look for someone who lives near you (in case you want to be interviewed in person).

However, occasionally, we will get an opportunity to hire a really great interviewer who lives far away from most of our HRS participants. When that happens, that person will interview participants from all over the country. So, if you live in Louisiana and your interviewer is from Nevada that is probably why!

Once the interviewer is selected and the appointment is set, the interviewer will call you (or visit you) at a time that you set up together.

He or she will ask you lots of questions about your life and record the answers in a laptop computer.

Most of the interviews are done by telephone (about 80%), but we talk to a lot of you in-person as well. If you would like to give us your information in person, please tell your interviewer. He or she will be happy to schedule an in-person interview.

Processing the Data Once you finish your interview, the information goes directly to the central office in Ann Arbor, Michigan. We combine your information with the data from all of the other HRS participants. Then we remove any information that might make it possible for someone to connect your information with you. Once this is done,

we make the data available to researchers and policymakers.

Keeping Your Information Safe One of the most important jobs for our staff is to keep your data confidential and safe. Our staff goes to great lengths so that no one will be able to link your identity to the other information you give us. If you would like more information about how we protect your data, you can take a look at our Participant Website at <http://hrsparticipants.isr.umich.edu> or call one of our toll-free numbers listed on page 12 of this newsletter.

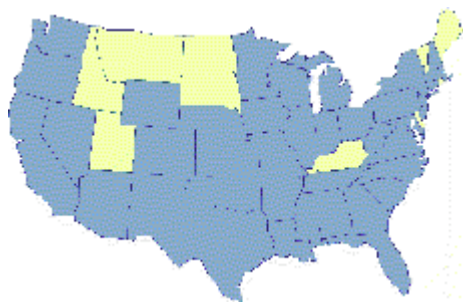
The Internet Project

A group of prominent researchers are in the process of designing an Internet Study to see whether it makes sense to set up a way to answer the HRS questions over the Internet.

They are wondering if the Internet would make the HRS interview easier and more convenient for some of our participants, however most of our participants don't have access to the Internet at this time (see page 6 for your answers about Internet use).

As part of the 2002 HRS interview, we asked you if you use the Internet. Many of you said yes and said that you would be interested in participating in our Internet study. If you did, then we may be contacting you or already have in 2003 to invite you to do just that. We hope you will join us!

Where are we? Like you, the HRS staff are located in offices all across the country. We thought you might like to see a map showing all of the states where our staff work:



 States where HRS staff are located

Why Do We Keep Asking You the Same Questions?

Although the questions that we ask are the same, your answers usually change over time. When we originally set up the HRS, we decided that it would be important to talk to you every two years so that we could see just exactly how things change for you over time. For example, we wanted to better understand how your situation has been changed by recent changes in the economy or political situation.

Most of the research that we talk about in this issue of the newsletter examines this type of change. For example, the article on page 11 talks about how the ups and downs of the stock market have affected

(Continued on Page 5)

WHY DO WE ASK THE THINGS WE DO?

Why Do We Ask About Your Adult Children?

We recently asked our interviewers what they thought you would like to hear about in the newsletter. They provided us with a very long list of your questions. One of your top questions was, Why do we ask you about your adult children?

The main reason that we ask about adult children is because friends and family are an important part of most people's well-being. Not only do they provide emotional support, they also may provide financial or other assistance to each other. In fact, not only do we ask you about your adult children, we also include questions about other important parts of your life. We ask about your parents, friends, and religious activities, for example.

It turns out that families continue to support each other long after the children leave home. Often people care for their parents when they are ill or they care for young grandchildren. People also may

help their parents and children financially.

Understanding the way families support each other is, therefore, critical to understanding the situation of older people in the United States. As part of the HRS, we ask several questions about adult children you have. The questions include topics like:

- How much you help each other financially
- How much you help each other by providing care (for example, if one of you has a health problem, or if grandchildren need care)
- Whether you share your home with a parent or adult child and why
- What your expectations are about how much you are likely to help each other in the future

For years, researchers have believed that the relationships between parents and children are very much affected by certain characteristics of the children such as gender or financial circumstances.

Why Do We Keep Asking You the Same Questions? *(Continued from page 4)*

people's financial situations and their decisions about retirement and bequests. Another article, on page 9, explores the changes in people's ability to learn and remember. The article on page 7 examines how work can affect people's health over time.

If we did not ask you the same questions each time we talk to you, none of this research would have been possible.

Because of this, we also ask for the following information about your adult children:

- their gender
- their marital status
- the date they left your home (if they are not living with you now)
- how close they live to you
- their work status
- their financial situation and how it compares to yours

Thank you for taking the time to answer our questions over the years. You have helped us to learn more about how your lives are changing or not. This information is critical to our ability to help researchers and policymakers understand the situation of older Americans.

HRS BY THE NUMBERS

Who Has Internet Access

The Internet has become an important part of business in the United States. However, there are still a lot of older people in the United States who do not have access to the Internet. In 2003, we will be doing a study to examine how we can use the Internet to make the interview more convenient for HRS participants (see pages 1 and 4 of this newsletter for more information about HRS and the Internet). To prepare for that study, we asked you about your Internet use as part of the 2000 HRS. We thought you might be interested in knowing what we found.

It turns out that many HRS participants (about 30%) say you have access to the Internet. Of those who said you had Internet access, most of you (about 75%) said you would be willing to participate in a study to assess how well the Internet would work for collecting the HRS data (for those who want to complete their interview over the Internet).

Age and Internet Access

Age seems to make a difference in how likely people are to have Internet access. Younger HRS participants are the most likely to have access. In fact, over half (about 52%) of those of you who are under 60 say you do have access.

Percent of HRS Participants Who Have Access to the Internet, by Age

| | |
|----------------------|-----|
| Under 60 years old | 52% |
| 60 – 69 years old | 35% |
| 70 – 79 years old | 22% |
| Over 80 years old | 9% |
| All HRS participants | 30% |

Many of those in the older groups, however, do not. For example, among HRS participants over 80 years of age, about 9% say you have access.

Gender and Internet Access

Men and women are about equally likely to have Internet access. About 32% of men and 29% of women say you have access.

Percent of HRS Participants Who Have Access to the Internet, By Gender

| | |
|-------|-----|
| Men | 32% |
| Women | 29% |

Race and Ethnicity and Internet Access

Internet access is quite different for people over 50 who are of different races or belong to different ethnic groups. Whites (who are not Hispanic) are the most likely to have Internet access. About 35% of all whites we spoke with had access while 12% of African Americans and 10% of Hispanics said you had access to the Internet either at work or at home.

Percent of HRS Participants Who Have Access to the Internet, by Race and Ethnicity

| | |
|----------------------|-----|
| White (non-Hispanic) | 35% |
| African American | 12% |
| Hispanic | 10% |

RESEARCH CORNER

Leading researchers in the U.S. and worldwide use the HRS data. Here are some findings based on published research:

The Benefits of Volunteer and Paid Work

Both you and our interviewers have asked us to talk more about our older HRS participants. In response, we are focusing on HRS participants who are over 70 in this issue's Research Corner and Research in Progress.

Productivity After Age 70

As people get older and retire, the kinds of work they do often change. While some people work full-time throughout their lives, most retire at some point. After retirement, some people continue to work, but in a new career. Others take some time off to have fun. Still others dedicate themselves to volunteer work or taking care of grandchildren.

Two researchers looked at whether volunteer and paid work can affect people's health and how long they live.

Volunteering First, they wanted to know how much time people 70 and older spent volunteering. They found that nearly 12% of HRS participants who were 70 or older volunteered 100 or more hours per year. Some of them (about 2%) volunteered over 500 hours per year.

Percent of HRS Participants Over 70 Who Volunteered in 1998 (more than 100 hours)

Number of Hours (per year)

| | |
|---------|-------|
| 100-199 | 4.7% |
| 200-499 | 5.6% |
| 500+ | 1.6% |
| Total | 11.9% |

Working for Pay The researchers also wanted to have a sense of how many people continue working for pay after the age of 70. About 7% of the HRS participants we spoke with still worked for pay. In

some cases, it was only a few hours a week – 1.3% worked an average of about 2 to 10 hours a week. But the remaining workers averaged about 10 hours or more each week.

Percent of HRS Participants Over 70 Who Worked for Pay in 1998 (more than 100 hours)

Number of Hours (per year)

| | |
|----------|------|
| 100-499 | 1.3% |
| 500-1199 | 2.8% |
| 1200+ | 2.5% |
| Total | 6.6% |

Is Work After Age 70 Good for Your Health?

The main goal of the researchers was to understand whether this work helped to protect people from poor health and death, and, if so, why?

Did You Know?

We are always telling you that the HRS is a unique and important study. Did you know that the HRS is the largest social science project in the Behavioral and Social Research Programs, a division of the National Institute on Aging (NIA) at the National Institutes of Health?

The researchers looked at HRS participants over 70 to see if those who worked in 1998 were in better health in 2000 than those who had not.

They found that volunteer and paid work does seem to make a difference in people's health. That is, HRS participants (who are 70 years old and older) who did volunteer or paid work in 1998 were less likely to be in poor health two years later in 2000. Not only were they less likely to be in poor health, they were also less likely to die (5.6% chance versus 16.8% chance).

However, they didn't have to work full-time to benefit. Additional hours beyond 100 did not appear to make much of a difference. In other words, those people who worked more than 100 hours in a year did not benefit any more than those who worked just 100 hours.

Why Does Work Matter?

While this research suggests that work does have health benefits for older Americans, we are not sure why. The researchers suggest several possible reasons:

- people who work are happier and healthier because they have more social contacts and support.
- people who work are more likely to be physically active. At a minimum, they have to get to work and move around at work (e.g., between offices).
- Working helps people maintain a healthy disposition and higher self-esteem.

Researchers will continue to use the HRS to better understand how and why work and other productive activities affect your health.

Want to know more? Here are some references:

Michael D. Hurd and James P. Smith, "Expected Bequests and their Distribution," March 2002.

Ming-Ching Luoh and A. Regula Herzog. "Individual Consequences of Volunteer and Paid Work in Old Age: Health and Mortality." *Journal of Health and Social Behavior*, December 2002.

Mary Beth Ofstedal, Gwenith F. McAuley, and A. Regula Herzog, *Documentation of Cognitive Functioning Measures in the HRS*, August 26, 2002.

Mary Beth Ofstedal and A. Regula Herzog, "The Effect of Lifestyle on Change in Cognitive Functioning among the Oldest-Old," September 2001.

Purvi Sevak, "Wealth Shocks and Retirement Timing: Evidence from the Nineties," May 2002.

Carolyn L. Turvey, Robert B. Wallace, and A. Regula Herzog. 1999. "A Revised CES-D Measure of Depressive Symptoms and a DSM-Based Measure of Major Depressive Episodes in the Elderly." *International Psychogeriatrics*, 11(2):139-48.

Kathleen McGarry and Robert F Schoeni, "Transfer Behavior Within the Family: Results From the Asset and Health Dynamics Study," *The Journals of Gerontology*, Volume 52B, May, 1997.

Douglas A. Wolf, Vicki Freedman, and Beth J. Soldo, "The Division of Family Labor: Care for Elderly Parents," *The Journals of Gerontology*, Volume 52B, May 1997.

John C. Henretta, Martha S. Hill, Wei Li, Beth J. Soldo, and Douglas A. Wolf, "Selection of Children to Provide Care: The Effect of Earlier Parental Transfers," *The Journals of Gerontology*, Volume 52B, May 1997.

RESEARCH IN PROGRESS

We are pleased to be able to share these preliminary findings with you:

Life After 70: Aging, If You Don't Use It, Do Learning, and Memory You Lose It?

For some people their ability to remember and to learn new things can get difficult. These skills can be important in our ability to handle the day-to-day challenges of life.

Researchers often use the word cognition to describe people's ability to learn and remember. Even though a person's cognition is important, it has rarely, if ever, been measured in a large-scale survey. Because it is so important to the well-being of older Americans, we ask several questions about cognition as part of the HRS interview (see the gray box to the right for a description of our cognition evaluation).

As important as cognition is, we don't know all that much about why it can change with age. In addition, we don't really know why some people have great memories and figure things out well as they age, while others do not.

The information that we collect about your cognition is very helpful to researchers trying to understand how and why cognition changes as people age and how it affects other aspects of life.

Many people believe that being active can help keep people physically healthy and keep their minds sharp. For example, doing things like exercising, doing crossword puzzles, and learning a new language might help keep your mind and body healthy.

Over the years, researchers have found clues that suggest that this may be true. When it comes to cognition, it seems that keeping active may benefit people's memory and ability to figure things out as they age. In addition, researchers have also looked at other lifestyle factors, such as alcohol consumption and smoking.

A group of researchers have started to examine the HRS data to try to understand what affects people's cognition. We thought you might be interested in hearing about some of the things that researchers are starting to explore.

The researchers examined data from HRS participants who were 70 years old or older in 1993 to see how their cognition was. They then looked at their behavior in 1993 and how it affected their cognitive scores between 1993 and 1995 and again between 1995 and 1998.

Cognition: How Does the HRS Measure Learning and Memory?

There are several aspects that make up what researchers call cognition. Cognition includes learning, memory, reasoning, orientation, calculation, and language. The HRS assessment of cognition is based on the research from several areas: psychology, gerontology, and medicine. The questions we ask were selected from two well-respected and well-tested cognition tests: the Mini-Mental State Exam (MMSE) and the Telephone Interview for Cognitive Status (TICS).

The HRS designers and other researchers have examined our assessment for accuracy. Since this is a new way of assessing cognition, we have plans to continue to test our questions. So far, our tests show that they are indeed a good way to measure cognition.

The researchers studied many lifestyle factors to see what affected cognition. Two of the factors they examined were smoking and drinking.

Do Smoking and Drinking Alcohol Affect People's Ability To Learn New Things? Researchers looked at whether smoking and drinking alcohol had any effect on older people's cognitive skills.

The preliminary results did not indicate evidence that smoking (or past smoking) has much of an effect on people's cognition. However, drinking alcohol was a different story.

The researchers looked at people's present drinking habits and whether they'd had a "drinking problem" in the past. The amount that older people drank at that time did not seem to have much of an effect on their cognition. However, past drinking did. It turns out that those who drank heavily in the past were the most likely to have decreases in their ability to remember and learn new things. This held true even for people who no longer drink alcohol.

An unforeseen finding is that those who were drinking a small amount (light drinkers) were less likely than those who did not drink at all to have decreases in cognition.

Cognition and Volunteer or Paid Work Working appears to help keep people

cognitively sharp. Those who worked (either as volunteers or for pay) in 1993 and 1995 were less likely to have cognitive declines in 1995 and 1998.

When these researchers looked at volunteer work, they found that all kinds of volunteer work seemed to protect people's cognition. They examined both formal volunteer work (e.g., work in an organization) and informal volunteer work (e.g., helping a family member, friend or neighbor). In both cases, those who volunteered were less likely to experience cognitive decline.

How Your Behavior Affects Your Well-Being

Because the HRS includes so much information and because we ask you the same questions every two years, it is an excellent resource for looking at what factors affect your cognition over time.

Other Factors? Other factors, like health, education, and wealth also seem to be related to people's ability to remember and learn new things. It seems that those with better health, more education and more money are less likely to lose their memory and ability to learn as they age.

Further Research: ADAMS

In order to learn more about memory and how it changes with age, HRS has teamed up with Duke University to conduct the Aging, Demographics, and Memory Study (ADAMS). You may be invited to participate in this very important follow-up study to the HRS.

HRS in The News

You might be interested in some of the latest articles that have been published based on HRS research.

"The New Rules Of Retirement—Losses Prompt Revised Thinking on How to Invest And When to Retire; Rebuilding Your Nest Egg," *Wall Street Journal*; July 9, 2002; By Jeff D. Opdyke and Ruth Simon.

"Hold off retiring to that sunny ocean villa—Sharpest stock market decline in 65 years forces boomers to reevaluate twilight years." *Christian Science Monitor*, October 7, 2002; David T. Cook.

"As Portfolios Shrink, Retirees Warily Seek Work," *The New York Times*, Sept. 8, 2002.

"Beyond the Nest Egg," *The Wall Street Journal*, Sept. 30, 2002.

How Changes in the Stock Market Affected Us

In the past, it was not very common for people to invest their retirement savings in the stock market. Today, things have changed. Most people in the United States have some part of their retirement savings invested in the stock market (for example, through direct stock investments, IRAs, or through their jobs' 401(k) retirement plans).

The stock market has always been a risky way for people to invest their money. But the changes in the stock market have been even more dramatic over the last 10 or 15 years. In the 1990s, the stock market paid off on people's investments so well that many Americans made large amounts of money on their stocks – larger than they ever had dreamed possible. In fact, policymakers considered allowing people to invest part of their Social Security savings in the stock market.

Over the last few years, however, the stock market has fallen dramatically, much more than anyone expected. This means that many retirees in the 1990s and the early part of the

21st century face a new and different situation.

The HRS provides just the kind of financial information needed to understand how these changes are affecting older people in the United States. HRS researchers are starting to be able to examine the data to understand just how people were affected by the dramatic gains in the 1990s and the dramatic losses over the past couple of years.

Reactions to the Stock Market Boom in the 1990s

Several HRS researchers have already started using your data to understand who made money in the stock market in the 1990s. They are also examining how those unexpected gains changed people's retirement plans.

Unexpected Earnings and Retirement Decisions One HRS researcher examined whether people who had unexpected gains in the stock market were more likely to retire early.

The researcher looked at those HRS participants who were 51 to 61 years old in 1992.

Specifically, she looked at those HRS participants who had large windfalls in the stock market

(doubling their overall wealth) between 1992 and 1998. She wanted to know how those windfalls affected people's retirement decisions between 1996 and 1998.

It turns out that stock market windfalls affected men and women differently. Apparently, for women, unexpected profits in the stock market did not increase their likelihood of retiring early. However, for men, we discovered something different. Those with unexpected gains were more likely to retire early. For example, those men who had windfalls (their overall wealth doubled) were more likely (by 6 to 7 percentage points) to retire early.

Unexpected Earnings and Bequests Two other researchers examined people's expectations about how much money they expect to leave to their children. They wanted to know if people would respond to the windfalls from the 1990s by spending more money or by saving it for their children.

They found that people expected to leave about half (53%) of their wealth gains to their children (that is, those gains they had not been counting on).

Dramatic Losses

From the 2000 HRS data, researchers were already seeing dramatic losses in people's stock investments. Some of these researchers, quoted in a recent Wall Street Journal article, looked at HRS participants' stock and IRA holdings, not including stocks held through pensions, in 2000. Then the researchers assumed that those stocks lost about the same amount of money as the overall stock market (based on losses in the Standard & Poor's 500).

According to the researcher's estimates, those in their late 50s and early 60s and those with the most money had lost the most.

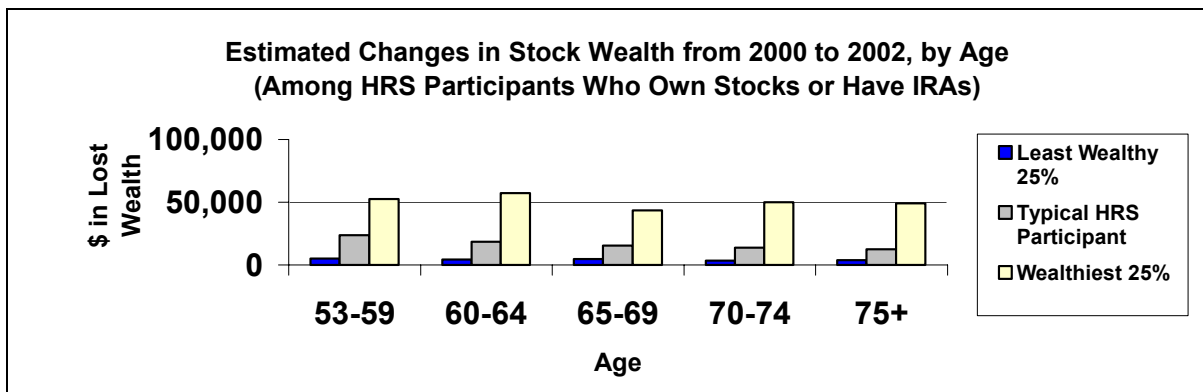
In fact, their research suggests that the typical retiree (who owns stocks or IRAs) lost about 10% of his or her portfolio.

However, these are just rough estimates. Once the HRS 2002 data comes out, there are plans to update the estimates. As part of the 2002 survey, we asked you detailed questions about your finances, stocks and IRA holdings.

This information will help researchers to make much more accurate estimates of exactly who lost money, and how it is affecting them.

What Will the Future Bring?

Researchers will continue to look at how people have been affected by the dramatic shifts in the stock market. Policymakers will want to understand how people are being affected by the stock market. The research using the HRS data will help to provide that information.



For more information, feel free to:

Write us at:

University of Michigan
Survey Research Center
Health and Retirement Study
P.O. Box 1248
Ann Arbor, MI 48106-1248

Visit the HRS Participant Website at:
<http://hrsparticipants.isr.umich.edu>

Call the toll free HRS telephone number:
1-800-759-7947 1-800-272-2815
Spanish 1-800-643-7605

Our Sponsors

Primary support for the HRS comes from the National Institute on Aging at the National Institutes of Health, with additional support from the Social Security Administration.