

This issue is in collaboration with NCCR LIVES at the University of Lausanne, the Columbia Aging Center at Columbia University, the Norwegian Institute of Public Health, the College of Population Studies at Chulalongkorn University, and the Wittgenstein Centre (IIASA, VID/ ÖAW, WU).

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Food for Thought

GENDER EQUALITY FOR MEN

THE MISSING SIDE OF THE GENDER REVOLUTION

It's time to complete the gender revolution. We fought for women's rights in the public realms of politics and work. It is now time to fight for men's equal rights within families.

It starts at conception. Today, men have little control over whether a pregnancy shall be carried out or terminated. Meanwhile, couple instability has rendered men's relationships to their own and other children increasingly complex. Fathers have a greater responsibility to provide for their non-co-resident children, but have fewer chances of spending time with them. Step-fathers invest in their relationships with step-children, but these ties are virtually ignored in court. Regulations across Europe vary but generally focus far more on enforcing fathers' support obligations than their rights. But men increasingly want more responsibility vis-à-vis their children. Let's let them pitch in.

Research shows that everyone benefits – women, children, and men – when men are regularly involved in children's lives. We set our agenda to include the next steps of the gender revolution and men's equal rights (and duties) in our research. It's time for policymakers to do the same.

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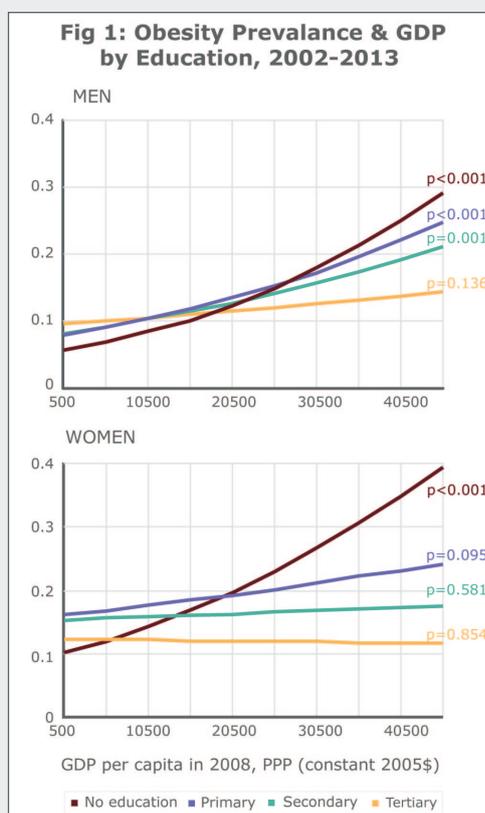
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Figures in Focus

EDUCATION AND OBESITY DO YOUR HOMEWORK

Obesity and overweight is largely preventable, yet widespread around the world. They are particularly prevalent in richer countries. Since 1980, the global percentage of overweight adults has increased from around 30 to closer to 40. In Europe, the figure has reached 50.

Our study [1] suggests education could help. Data from 70 countries show that increasing GDP pushes up the prevalence of obesity among people with the lowest levels of education, but largely leaves the best educated alone (Figure 1). The data support the view of obesity as a social phenomenon. They suggest



that, by improving health-related decision-making, investing in education already mitigates the health risks that accompanies economic development.

It's important to note that the data are a cross section of now. This means we cannot determine, or at least test, exactly how economic development seems to affect obesity among the least educated without comparable data for many countries over time. We will also need a better understanding of the specific mechanisms by which education affects nutrition, activity levels, and other relevant health behaviours. Only then could we determine the strength of education's preventative effect on obesity compared to other explanations.

Our findings nevertheless show a clear relationship between education and obesity, strengthening the argument that public health is more than a matter of the usual strategies to limit weight increase. Targeted interventions across many policy areas will be needed for both developing and advanced economies to meet the WHO's 2025 obesity target. Education is likely to be a great place to start.

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[1] Jonas Minet Kinge, Bjørn Heine Strand, Stein Emil Vollset, and Vegard Skirbekk (2015): Educational inequalities in obesity and gross domestic product: evidence from 70 countries. J Epidemiol Community Health, 69(12), 1141-1146.

DEMOGRAPHY & POLICY

Living longer

Determining whether we are using our extra years productively

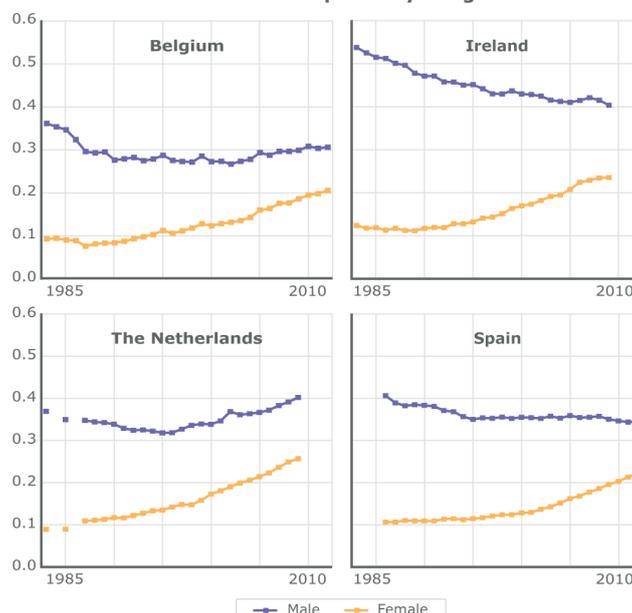
Our lives are getting longer, yes, but this does not necessarily imply more active years. As life expectancy continues to rise, there is a natural tendency to tack these additional years onto the economically inactive phases of our life course, namely to post-retirement. This can be costly for public budgets. It's "natural", though, because adding them anywhere else would require a conscious change to when we retire. Politically, touching retirement is risky, but this is not necessarily the problem. Many countries have already begun adopting measures to prolong working life. A key question is whether, how well, and for whom these measures are working.

STEP BY STEP

We know that national measures are bearing fruit with simple labour market participation data. We can even break this down by gender. From 1983 to 2010, the labour force participation of European men aged 50 to 74 declined and then recovered. Over the same period, we can see that women, who historically have a lower participation rate, begin to catch up. Older people in Europe are anything but homogenous in terms of health, socio-economic status, work history, education, and family arrangements – all of which vary by country. Working life expectancy (WLE) – what Eurostat calls "duration of working life" – is a measure capable of summarising the differences in labour force participation between and within countries and stands for the average number of years people can expect to be part of the labour force. Policy-makers should get to know it. Like most good indicators, WLE is a combination of existing, tested metres. In this case,

WLE combines life tables which contain information on the probability that a person will die in any given year, and labour force participation rates to get the number of economically active years a person has left. In our working paper [1], we take WLE at age 50 and we compare it to normal and healthy life expectancy, which provides the context needed to determine if national measures are really helping us put our extra years where they count.

Fig 1: Working life expectancy at age 50 as share of life expectancy at age 50



CATCHING UP

On the one hand, we don't see any immediately recognisable patterns across regions, welfare state type, or other variables. The data, however, reveal an important gender dimension: First, men in all 26 countries of the study still spend more of their remaining years working than women. This is not surprising as men still have higher labour force participation and shorter life expectancy than women. It is still significant, though, because it illustrates the disadvantage many women face in terms of pension

contributions that accumulate over the life course.

Yet we also see a general trend of convergence. In most cases, women have made gradual gains on men, but in Belgium, Ireland, the Netherlands and Spain, women made up considerable ground (Figure 1). This suggests that for the past two decades, women have been offsetting improvements in life expectancy with economic activity more effectively than men.

WHAT YOU'RE MISSING

Further analysis is needed to understand other important dimensions of working life expectancy, like education or country-specific developments. For example, differences in WLE at age 50 between education groups are intriguing and need to be explored more thoroughly; however, education-specific calculations of WLE at age 50 miss how young people transfer into higher education categories well into their 30s. Hence, WLE by education should be calculated for the whole life course. Looking at the educational dimension in more detail would allow us to uncover inequalities in pension systems, but we would need comparable,

education-specific time-series data for life expectancy, which at the moment only few countries collect. If our data show anything, though, it is that, if we want to fairly but fully exploit our ever-improving life expectancy, the effort will be justified.

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[1] Elke Loichinger and Daniela Weber (2016). "Trends in Working Life Expectancy in Europe." Working Paper WP 16-004, International Institute for Applied Systems Analysis.

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