



LEGOS **Laboratoire d'Economie et de
Gestion des Organisations de
Santé**



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AGIR Project

Work Package 2 : Use of health and nursing care by the elderly

LEGOS Working Paper: data and results for France

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1 Introduction

The AGIR project (Ageing, health and retirement in Europe) is a research program of the European Commission. The aim is to establish how much the health of the elderly has improved and to provide projections of the measure for the future. These bio-metric projections will be used to produce estimates of the demand for health care by the elderly in the future and to predict whether the trend in early retirement will continue along with the projected improvement in fitness of the elderly. Scenarios will be produced for the development of pension and health expenditure, with different options for social and budgetary policy.

The work program is implemented in two main phases: a phase of data collection and descriptive analysis and a phase of analysis, scenario calculations, synthesis and dissemination.

The first part of the project consists in three work packages.

- Work Package 1 (WP1) studies *bio-demographic aspects of ageing*;
- Work Package 2 (WP2) studies *use of health and nursing care by elderly*;
- Work Package 3 (WP3) studies *determinants of retirement*.

The second work package is managed by DIW (Germany) with contributions in the field of collection and compilation of data from CEPS (Belgium), CPB (Netherlands), ETLA (Finland), FEDEA (Spain), FPB (Belgium), NIESR (UK) and EURISCO-LEGOS (France).

French data gathered from LEGOS for WP2 are presented in this working paper.

The first section covers data on use of health care in French population: admissions to hospital (within the last three months), the length of hospital stay, and the frequency of contact with a doctor (general practitioner, specialists) by gender and age-groups.

In the long term care section, numbers of persons with severe disability in institutions or at home are calculated by defining severe disability by two or more restrictions in ADL and at least one restriction in IADL.

The next section provides long time-series data on the labour market. It deals with evolution of activity rates and with employment structure evolutions in terms of part-time and temporary contracts.

In the last section we collected data on households. French population marital status (single, married, divorced, widowed), family structure (single adult with child, married with child/children, married without children) and household composition are described by gender and age-groups.

In each section, data are presented as follows. After detailing the data required, French data provided to DIW are defined and commented. Each time, an extract of data is given. When necessary, a methodology definition is given.

2 Use of health care

2.1 Data required

For WP2, data needed are about admissions or discharges to/from hospital by gender and age-groups (within one year), the length of hospital stay by gender and age-groups, and the frequency of visits to a doctor by gender and age-groups. All for the most recent year and if possible – for past years.

Table a

Admissions to or discharges from a hospital within one year

Age or Age-groups	Male	Female
0-5		
5-15		
15-25		
25-35		
35-45		
45-55		
55-65		
65-75		
75 +		
total		

for the most recent year
and - if available - for past years

Table b

Length of hospital stay

Age or Age-groups	Male	Female
0-5		
5-15		
15-25		
25-35		
35-45		
45-55		
55-65		
65-75		
75 +		
total		

for the most recent year
and - if available - for past years

Table c

Frequency of contact with a doctor

Age or Age-groups	Male	Female
0-5		
5-15		
15-25		
25-35		
35-45		
45-55		
55-65		
65-75		
75 +		
total		

for the most recent year
and - if available - for past years

2.2 Data available

The annual national survey on health and national health insurance (SPS survey cf. annex) provides data about admissions and duration staying at hospital, during the last three months, for two years (1998 and 2000).

2.2.1 General information on SPS samples

The survey SPS 1998 interviewed 23 036 persons; SPS 2000 20 045 persons. After weighting, each sample is representative of insured persons in the general social security system and in independent and agricultural professions.

Tables 1a and 1b deal with the population distribution by gender in the SPS surveys, without and with weighting. Weighting permits correction of sample skews: it considers real characteristics of the French population structure by age and gender. For example, in the sample, the proportion of men in 2000 is over-evaluated: 49,9 % instead of 48,8 % in fact.

Table 1a : Gender distribution (without weighting)				
Gender	1998		2000	
	Frequency	%	Frequency	%
Men	11574	50.2 %	9998	49.9 %
Women	11462	49.8 %	10047	50.1 %
Total	23036	100 %	20045	100 %

Source: SPS 1998, 2000

Table 1b : Gender distribution (with weighting)				
Gender	1998		2000	
	Frequency	%	Frequency	%
Men	11332	49.2	9777	48.8 %
Women	11704	50.8	10268	51.2 %
Total	23036	100 %	20045	100 %

Sources SPS 1998, 2000

Then, the population is split up into age-groups (in table 2) and into age-groups and gender (in table 3). All following tables are corrected with weighting.

Table 2 : Age-groups distribuion (weighted)				
Age-groups	1998		2000	
	Frequency	%	Frequency	%
0-5	1280.6	5.6 %	1111.36	5.6 %
5-15	3293	14.5 %	2889.63	14.6 %
15-25	3404.9	14.9 %	2663.38	13.4 %
25-35	3473.5	15.2 %	2795.47	14.1 %
35-45	3346.6	14.7 %	3112.63	15.7 %
45-55	3094.9	13.6 %	2821.26	14.2 %
55-65	2127.7	9.3 %	1892.95	9.5 %
65-75	1797.3	7.9 %	1566.78	7.9 %
75 and more	968.9	4.3 %	996.04	5.0 %

Sources SPS 1998, 2000
Note: age group 0-5 years represents 5.6% of 1998 population

Table 3 : Age-groups distribution by gender				
MEN	1998		2000	
Age-groups	Frequency	%	Frequency	%
0-5	673.3	6 %	589.4	6.1 %
5-15	1699	15.2 %	1453.8	15 %
15-25	1702.3	15.2 %	1353.9	14 %
25-35	1676.8	15 %	1319.2	13.6 %
35-45	1651.3	14.7 %	1512.1	15.6 %
45-55	1542.1	13.8 %	1408.8	14.6 %
55-65	1035.3	9.3 %	908.84	9.4 %
65-75	803.2	7.2 %	723.5	7.5 %
75 and more	417.2	3.7 %	399.65	4.1 %
WOMEN	1998		2000	
Age-groups	Frequency	%	Frequency	%
0-5	607.3	5.2 %	522	*5.1 %
5-15	1594	13.8 %	1435.8	14.1 %
15-25	1702.6	14.7 %	1309.5	12.9 %
25-35	1796.7	15.5 %	1476.3	14.5 %
35-45	1695.2	14.6 %	1600.5	15.7 %
45-55	1552.8	13.4 %	1412.5	13.9 %
55-65	1092.4	9.4 %	984.1	9.7 %
65-75	994	8.6 %	843.3	8.3 %
75 and more	551.6	4.8 %	596.4	5.9 %

Note : *For women, age-group 0-5 represents 5.1 % of the French women population in 2000.
Source: SPS 1998, 2000, data weighted

2.2.2 Admissions from hospital during the last three months

SPS surveys include questions about hospital admissions *in the last three months* before interviews.

We define an admission variable which counts the number of admissions during the last three months.

This discrete variable is reduced to only two categories (admission or no admission) because over 90 % were admitted only one time during the last three months.

So, the distribution of admissions in the population are tabled for the 1998 survey and for the 2000 survey in tables 4a and 4b. The “Admitted” term corresponds to the number of persons who were admitted at least one time to hospital for each survey (during the last three months).

From either survey (1998 or 2000), the admission rate in the population corresponds to 3 or 4 % of the entire population. For the older population (75 years or more) the rate is over 7 % (see tables 4a, b).

For example, 3,2 % of the sample was admitted during the last three months in the 1998 survey: 3,1 % for men and 3,3 % for women. In 2000 survey, a little rise is observed compared to 1998 since 3,5 % of the sample was admitted during the previous three months : 3,6 % for men and 3,9 % for women.

Table 4a : Distribution of the total population of admitted persons by gender and age-group in 1998 (during the previous three months)– table a required

1998	Men		Women	
Age-groups	Admitted	%	Admitted	%
0-5	25.9	3.9 %	8.5	1.4 %
5-15	30.4	1.8 %	26.5	1.7 %
15-25	41.6	2.5 %	45.7	2.7 %
25-35	28.8	1.7 %	85.4	4.8 %
35-45	43.2	2.6 %	44.1	2.6 %
45-55	56.6	3.7 %	47.9	3.1 %
55-65	38	3.7 %	42.4	3.9 %
65-75	48.2	6 %	38.4	3.9 %
75 and more	30.8	7.4 %*	37.5	6.8 %
Total	343.5	3.1 %	376.6	3.3 %

Note: * 7,4 % of the 75 years or more age-group were admitted to hospital at least one time in 1998 (during the last three months).

Source: SPS 1998, data weighted

Table 4b : Distribution of the total population of admitted persons by gender and age-group in 2000 (during the previous three months)– table a required

2000	Men		Women	
Age-groups	Admitted	%	Admitted	%
0-5	31.4	*5.3 %	17.6	3.4 %
5-15	37.3	2.6 %	21.0	1.5 %
15-25	18.4	1.4 %	41.5	3.2 %
25-35	38.2	2.9 %	73.9	5.0 %
35-45	42.0	2.8 %	53.8	3.5 %
45-55	52.1	3.8 %	50.8	3.6 %
55-65	43.6	5.0 %	39.9	4.1 %
65-75	50.4	7.1 %	45.3	5.4 %
75 and more	29.9	7.5 %	49.0	8.2 %
Total	343.3	3.6 %	393.0	3.9 %

Note : *5,3 % corresponds to the rate of the 0-5 age-group men admitted to hospital at least one time (during the last three months)

Source: SPS 2000, data weighted

In tables 5a and 5b, the admitted population is split up into age-groups.

In 2000, 18,8 % of admitted women belonged to the 25-35 age-group (see table 5b) whereas in the French population, this group represents 14 % (see table 2). The highest admission rate for these women may be due to pregnancy.

Admission rate for older people (65 and over) is very important (see table 5b): for example in 2000, 24 % of the admitted population are more than 65 whereas the proportion of this age-group in the French population is 13 % for this year (see table 2).

1998	Men		Women		Total	
Age-groups	Frequency	%	Frequency	%	Frequency	%
0-5	25.9	*7.6 %	8.5	2.3 %	34.4	4.8 %
5-15	30.4	8.8 %	26.5	7.1 %	56.9	7.9 %
15-25	41.6	12.1 %	45.7	12.1 %	87.3	12.1 %
25-35	28.8	8.4 %	85.4	22.7 %	114.2	15.9 %
35-45	43.2	12.6 %	44.1	11.7 %	87.3	12.1 %
45-55	56.6	16.5 %	47.9	12.7 %	104.5	14.5 %
55-65	38	11.1 %	42.4	11.3 %	80.4	11.2 %
65-75	48.2	14 %	38.4	10.2 %	86.5	12 %
75 and more	30.8	9 %	37.5	10 %	68.3	9.5 %
Total	343.5	100 %	376.6	100 %	719.8	100 %

Note: 7,6 % corresponds to the rate of the 0-5 age-group men admitted to hospital into the entire admitted population of males in 1998.
Source: SPS 1998, data weighted

2000	Men		Women		Total	
Age-groups	Frequency	%	Frequency	%	Frequency	%
0-5	31.4	9.1 %	17.6	4.5 %	48.9	6.7 %
5-15	37.3	*10.9 %	21.0	5.4 %	58.3	7.9 %
15-25	18.4	5.4 %	41.5	10.6 %	59.9	8.1 %
25-35	38.2	11.1 %	73.9	18.8 %	112.2	15.2 %
35-45	42.0	12.2 %	53.8	13.7 %	95.9	13.0 %
45-55	52.1	15.2 %	50.8	12.9 %	102.9	14.0 %
55-65	43.6	12.7 %	39.9	10.2 %	83.5	11.4 %
65-75	50.4	14.7 %	45.3	11.5 %	95.7	13.0 %
75 and more	29.9	8.7 %	49.0	12.5 %	78.9	10.7 %
Total	343.3	100 %	393.0	100 %	736.3	100 %

Note: *10.9 % corresponds to the rate of 5-15 age-group men admitted to hospital into the entire admitted population of males (during the previous three months).
Source: SPS 2000, data weighted

2.2.3 Duration of hospital stay in 2000

SPS Surveys 1998, 2000 provide the exit date and the entry date to hospital for people admitted in the previous three months. So, the duration of hospital stay is calculated by the difference between exit date and entry date, + 1 to count the number of days spent in hospital: Spell length is calculated by (exit date – entry date) +1.

So, spell length is 1 for admitted person who stayed one day but not the night.

In 2000 SPS survey, 3,5 % of the sample was admitted during the previous three months (736 persons without weighting).

These 736 admitted persons (without weighting) had 1132 stays in hospital during this period and these are detailed in this paragraph.

Table 6 displays the average lengths of stays by age and sex. Admitted persons stay on average one week (6 ½ days) in hospital.

Age-groups	Men	Women	Total
0-5	5.85	5.7	5.8
5-15	6	5.3	5.7
15-25	8	7.2	7.6
25-35	6.2	4.6	5.3
35-45	4.9	6.3	5.6
45-55	7.1	7.2	7.1
55-65	7.7	8.2	7.9
65-75	10	10.3	10.1
75 or more	7.6	7.4	7.5
Total	6.7	6.6	6.65
Observations	556	536	1132

Source: SPS 2000, data weighted
 Note: Average duration of stay in hospital was of 10 days for admitted people (in the previous three months, in 2000) aged 65-75.

In table 7, stays are split according to their length: one day (that is to say no night), 2-7 days, 8-14 days, more than 14 days.

Short stays (one day) represent 12,3 % of stays in hospital (see table 7). Most stays are one week or less (76% i.e. 12,3 + 63,4) (see table 7).

Length	Frequency	%
one day	138.8	12.3 %
2-7 days	716	63.4 %
8-14 days	184.4	16.3 %
more than 14 days	89.5	7.9 %
Total	1132	100 %

Source: SPS 2000, data weighted

In tables 7a to 7d and figures 1 and 2, hospital stays are shown by length and by age-groups.

Table 7a : Distribution by age-group for one day stays in 2000				
Age-groups	Men		Women	
	Frequency	%	Frequency	%
0-5	8.5	12 %	5.3	8.1 %
5-15	10.6	15 %	12.5	19 %
15-25	7.7	10.9 %	6.1	9.3 %
25-35	7.5	10.5 %	11.9	18 %
35-45	16.3	23 %	14.4	21.8 %
45-55	8.7	12.3 %	4.6	7 %
55-65	4.3	6.1 %	3	4.6 %
65-75	6.2	8.8 %	5.7	8.6 %
75 or more	0.9	1.3 %	2.5	3.8 %
Total	70.8	100 %	66	100 %

Source SPS 2000, data weighted
 Note: for men, 12% of shorts stays (one day) are stays by boys aged 0-5, *i.e.* boys aged 0-5 represent 12% of men admitted for only one day.
 See *hospitalduration.xls*

Table 7b : Distribution by age-group for 2-7 day stays in 2000				
Age-groups	Men		Women	
	Frequency	%	Frequency	%
0-5	28.4	8.4 %	18.6	5.3 %
5-15	74.3	21.9 %	55.9	16.1 %
15-25	28.4	8.4 %	45.4	13.1 %
25-35	48.3	14.2 %	57.3	13.1 %
35-45	57.4	16.9 %	57.2	16.5 %
45-55	29	8.5 %	35.5	16.4 %
55-65	30.8	9.1 %	34	9.8 %
65-75	28	8.3 %	25.7	7.4 %
75 or more	14.9	4.4 %	18	5.2 %
Total	339.7	100 %	340	100 %

Source SPS 2000, data weighted
 Lecture: for men, 8.4% of 2-7 day stays are stays of by boys aged 0-5, *i.e.* boys aged 0-5 represent 8.4% of men admitted for 2-7 days.
 See *hospitalduration.xls*

Table 7c : Distribution by age-group for 8-14 day stays in 2000				
Age-groups	Men		Women	
	Frequency	%	Frequency	%
0-5	5.7	6.4 %	3.4	3.9 %
5-15	15.6	17.6 %	11.9	13.5 %
15-25	10.9	12.3 %	7.7	8.7 %
25-35	9.8	11 %	9.9	11.3 %
35-45	12.3	13.9 %	15.9	18.1 %
45-55	12.1	13.7 %	15.5	17.5 %
55-65	9.8	11 %	8.3	9.5 %
65-75	8.5	9.6 %	8	9.1 %
75 or more	4	4.5 %	7.6	8.6 %
Total	88.6	100 %	88.2	100 %

See *hospitalduration.xls*

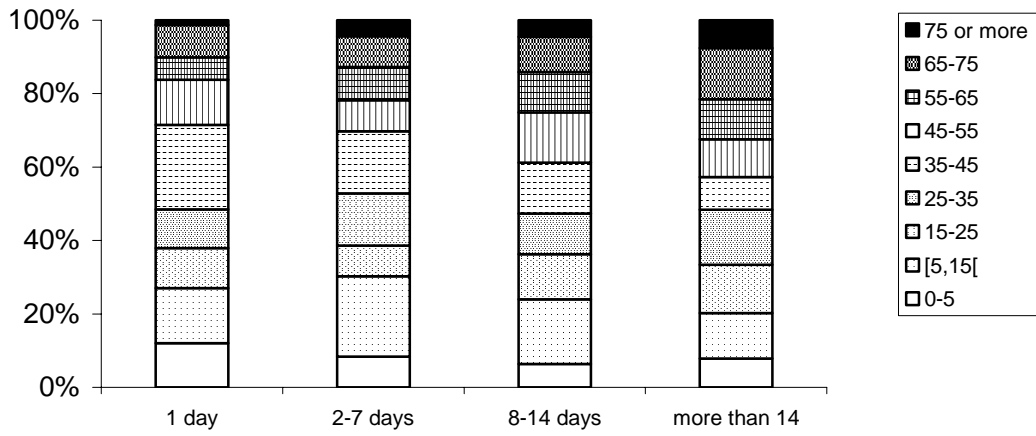
Age-groups	Men		Women	
	Frequency	%	Frequency	%
0-5	3.4	7.9 %	1.5	3.3 %
5-15	5.4	12.4 %	4.4	9.4 %
15-25	5.7	13.2 %	8	17.3 %
25-35	6.5	15 %	1.9	4.1 %
35-45	3.8	8.9 %	5.5	11.8 %
45-55	4.5	10.3 %	5.6	12.2 %
55-65	4.7	10.9 %	6.6	14.3 %
65-75	6	14 %	7.2	15.6 %
75 or more	3.3	7.6 %	5.5	12 %
Total	45	100 %	47	100 %

See *hospitalduration.xls*

Elderly people (aged 65 or more) are over-represented in long stays in hospital. Indeed, 21,6% of long stays (more than 14 days) are constituted by men of 65 or more while the proportion of this age-group in the population is only 11,6% (see table 3a).

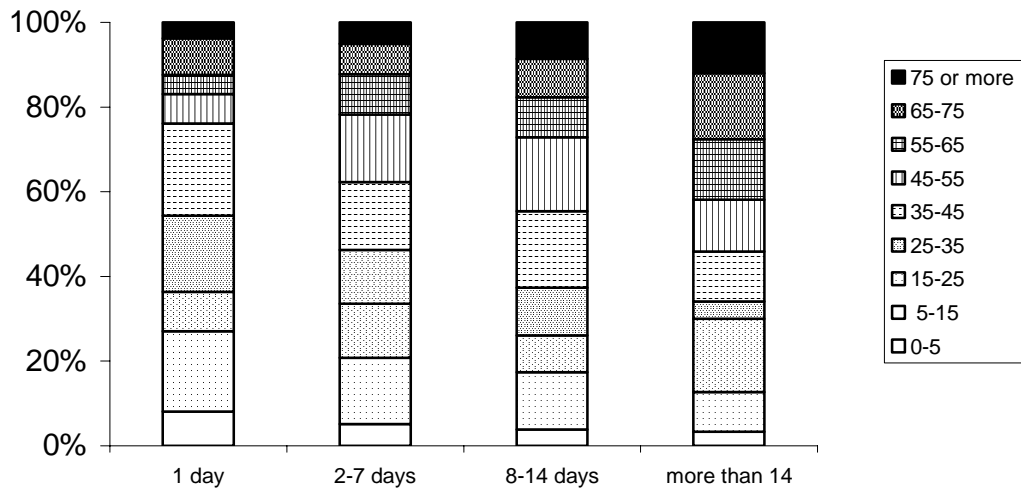
Also, 18% of admitted women, staying more than 14 days, are aged 65 or more while the proportion of this age-group in the population is 14,2% (see table 3b).

Figure 1 - Duration distribution by age group for men



Source: SPS 2000

Figure 2 - Duration distribution by age group for women



Source SPS 2000

2.2.4 Frequency of visits to a doctor

The permanent survey of living conditions' households in may 1999 (Enquête permanente Conditions de vie (EPCV)) provides data about *contacts with doctors in the last year* and information relating to health status.

Household interviewed for EPCV are representative of those living in normal residences (institutions are not included): 57 800 households replied to the may 1999 survey. In each household, a random selection of persons more than 14 years old (at most three people perhousehold) were interviewed. The final sample included 10 987 individuals.

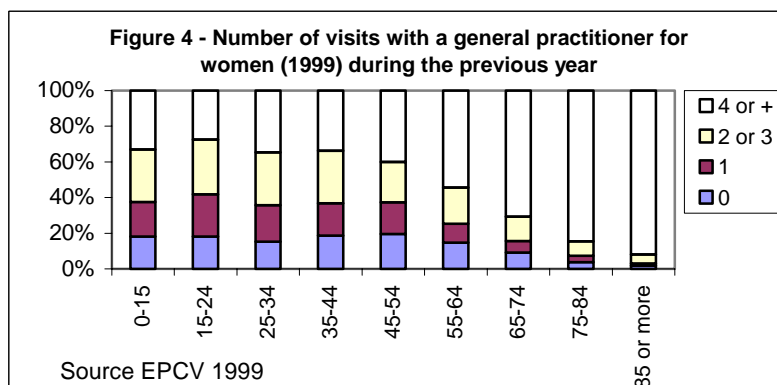
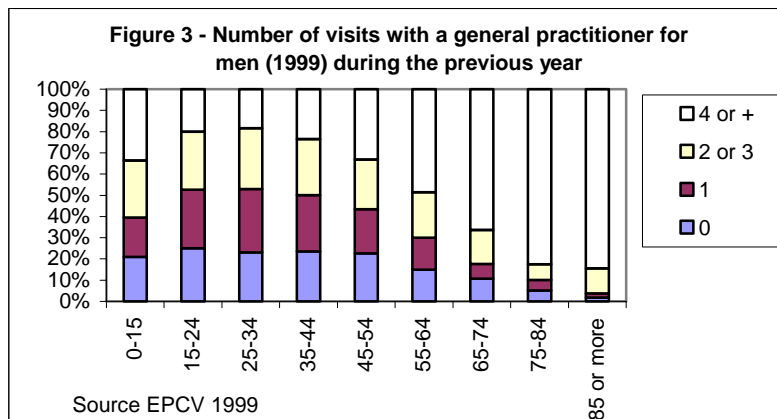
- Contact with a general practitioner

On average, 80 % of the male population had at least one visit to a general practitioner (GP) *during the year*. An analysis of the figure 3 is very explicit. The proportion of the male population with more than three contacts with a GP increases with age and represents the majority of men aged 55 or more. More than 80 % of people aged 75 or more make at least 3 visits to the GP.

In fact, children and the elderly often visit the GP.

Regarding the structure in the general population, three periods appear in the life course:

- Before age 15, the population often visits a GP (a third of children visit a GP at least three times per year);
- Between 15 and 44 years the visiting behaviour is relatively constant (this population has less contacts with a GP relative to the rest of the population, on average 75 %);
- After 45 years the number of visits increases with age.



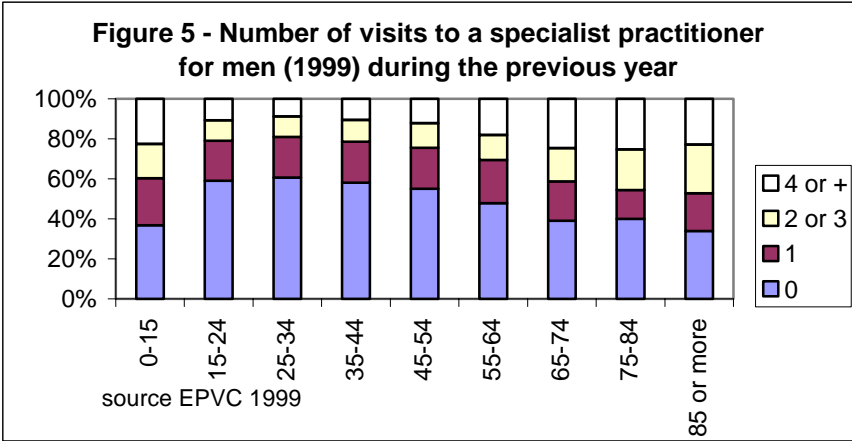
See *generalists.xls*

The general evolution of the number of contacts with a GP in the female population is the same as in the male population (see figure 4). Nevertheless, the trend is more pronounced, 85 % of women had at least one contact with a general practitioner (GP). In the elderly population, the proportion with three contacts or more is more marked for women: in the 85 or more age group, 92 % of women and 85 % of men. Also, whatever the age group, women have more contacts with a GP than men.

- Contact with a specialist practitioner

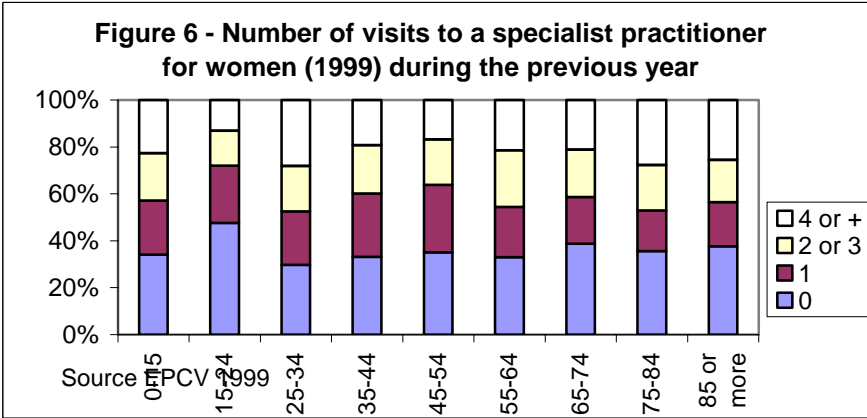
In France, 50 % of the male population visited a specialist practitioner in 1999. A lot of boys consult a specialist (65 % of the less than 15 age-group): the proportion of the population is the same as for the oldest age group! An explanation is the regular visits required by the social security system for young children: thereby, they often visit generalists or paediatricians .

Correlation between age and the number of visits to a specialist clearly appears. In particular, the rise of the proportion with two or more contacts is substantial with age (see figure 5).



See *specialists.xls*

Figure 6 shows that women have very different behaviour. In fact, the correlation between age and frequency of contacts is not straightforward. 65 % of the female population met a specialist during the year. From 34 years, the proportion of the population no visiting a specialist practitioner is relatively constant, fluctuating between 33 % and 38 % of the entire population. We can make the assumption that each age-group corresponds to a specific specialist ; obstetrician, gynaecologist, cancer specialist, and also surgeons.



See *specialists.xls*

3 Long-term care

3.1 Data required

Long-term care in institutions: the number of persons with severe disability (two or more restrictions in ADL and at least one restriction in IADL) in nursing homes and other institutions related to older persons (by gender and age-group and if possible by disability level) – for the most recent year and for selected years in the past.

Long-term care at home: the number of persons with severe disability in need of long-term care at home by gender, age-groups and disability level (if possible) – for the most recent year and for selected years in the past.

Long-term care in institutions and at home: may be in some EU countries there will be information about the recipients of long-term care independent from an institutional setting, otherwise we have to add LTC in institutions and LTC at home.

Table d

People in need for long-term care in institutions

Age-groups	Male	Female	
0-10			if possible by disability level for the most recent year and - if available - for past years
10-20			
20-30			
30-40			
40-50			
50-60			
60-65			
65-70			
70-75			
75-80			
80-85			
85-90			
90+			
total			

Table e

People in need for long-term care at home

Age-groups	Male	Female	
0-10			if possible by disability level for the most recent year and - if available - for past years
10-20			
20-30			
30-40			
40-50			
50-60			
60-65			
65-70			
70-75			
75-80			
80-85			
85-90			
90+			
total			

3.2 Data available

3.2.1 Definition of disability indicator

In this section, persons are considered with severe disability when they suffer two or more restrictions in activities of daily living (ADL) and at least one restriction in instrumental activities for daily living (IADL).

The number of persons with severe disability is calculated by using the KATZ indicator and IADL. Distinction is made between persons living at home and in institutions.

The Katz indicator has been collected in HID surveys (see below and section 6 in WP1 working paper) for men and women (home and institutions, together and separately). As recommended, we only consider the population aged over 15.

Handicaps, impairments, and dependency Survey (1998-1999)

(in French, Handicaps-Incapacités-Dépendance HID, see annex)

The first wave of the INSEE survey on handicaps, impairments, and dependency (hereafter HID) was carried out in late 1998. It covered a sample of about 15 000 people living in institutions even temporarily, as is the case with many people treated for mental illness. The institutions included homes for the elderly, homes for young and adult persons with disabilities, and psychiatric institutions. The same persons will be surveyed again in late 2000. The second wave is concerning people living at home: 17 000 individuals have been interviewed twice in 1999 and in 2002.

So, two HID surveys are available :

- HID in institutions in 1998 (with weighting : 220 000 men and 419 000 women)
- HID at home in 1999 (with weighting : 22,7 million men and 24,4 million women)

To obtain a complete population, results of both surveys (institution and home) have been added.

The Katz indicator has many dependence levels. It is defined by 8 modalities (A to H) by limitation on the following activities of daily living: washing, dressing, getting in and out of bed, toileting, eating.

- A- Independence
- B- One ADL dependence
- C- Two ADL dependences (washing included)
- D- Three ADL dependences (washing and dressing included)
- E- Four ADL dependences (washing, dressing, and getting in and out of bed included)
- F- Five ADL dependences (washing, dressing, getting in and out of bed included, and being continent included)
- G- Complete dependence
- H- Dependence on more than one ADL (different of C-D-E-F)

So, two or more restrictions in ADL are given by the Katz indicator equal to C+D+E+F+G+H.

The HID surveys provide some IADL information:

- HID 1998 in institutions gives information on shopping
- HID 1999 at home provides information on preparing cooking, doing housework and shopping.

For each survey, we calculate a cross-sectional variable corresponding to two or more restrictions in ADL and at least one restriction in IADL. This variable is defined as a *prevalence rate*.

For institutions, the survey provides only one IADL (*shopping*) so the prevalence rate calculation is not the same as for the home survey. So, the results are difficult to understand and **must not be compared with the home survey results.**

IADL are defined from these three questions:

<p>Shopping Question: Do you shop yourself ? (for all your purchases) This question is asked only to over 15 year olds who are not home bounded.</p>
<ul style="list-style-type: none"> 1- Yes, I do my shopping without any aid and with no difficulty 2- Yes, I do my shopping without any aid and with some difficulty 3- Yes, I do my shopping without any aid but with many difficulties 4- No, I only occasionally do shopping 5- No, I don't do any shopping
<p>Only one answer possible</p>

<p>Cooking Question: At the moment, do you cook yourself ? (without aid) This question is asked only to over 15 year olds who are not tetraplegic and not bed or room bounded.</p>
<ul style="list-style-type: none"> 1- Yes, with no difficulty 2- Yes, with some difficulty 3- Yes, with many difficulties 4- It's my spouse (or another household member) who cooks but I could do it if necessary 5- It's my spouse (or another household member) who cooks and I would have many difficulties to do it myself 6- Someone does it for me (cleaning woman, ...) but I could do it if necessary 7- Someone does it for me (cleaning woman, ...) and I would have many difficulties to do it myself
<p>Only one answer possible</p>

<p>Housework Question: At the moment, do you do the housework yourself ? (without aid) This question is asked only to over 15 year olds who are not tetraplegic and not bed or room bounded.</p>
<ul style="list-style-type: none"> 1- Yes, with no difficulty 2- Yes, with some difficulty 3- Yes, with many difficulties 4- It's my spouse (or another household member) who cooks but I could do it if necessary 5- It's my spouse (or another household member) who cooks and I would have many difficulties to do it myself 6- Someone does it for me (cleaning woman, ...) but I could do it if necessary 7- Someone does it for me (cleaning woman, ...) and I would have many difficulties to do it myself
<p>Only one answer possible</p>

If a person is not interviewed for IADL because of a health restriction (tetraplegic, or in bed or room bounded) she is classified as dependent for this IADL.

3.2.2 Dependence for 2 or more ADL

The dependence degree of the KATZ indicator has been collected for men and women for both HID surveys (home and institutions).

Then, an indicator is defined as two or more restrictions in ADL (given by the Katz indicator equal to C+D+E+F+G+H): this indicator can be compared in the two samples (see tables 8 and 9).

%	15-60	60-70	70-75	75-80	80-85	85-90	90 or more	Total
Men	21	30,5	44,2	39,9	51,5	53,4	54,5	34,8
Women	24,7	32*	44	53,6	50,2	57,1	62,6	50,2
Total	22,5	31,2	44,2	49,2	50,5	56,3	61,3	44,9

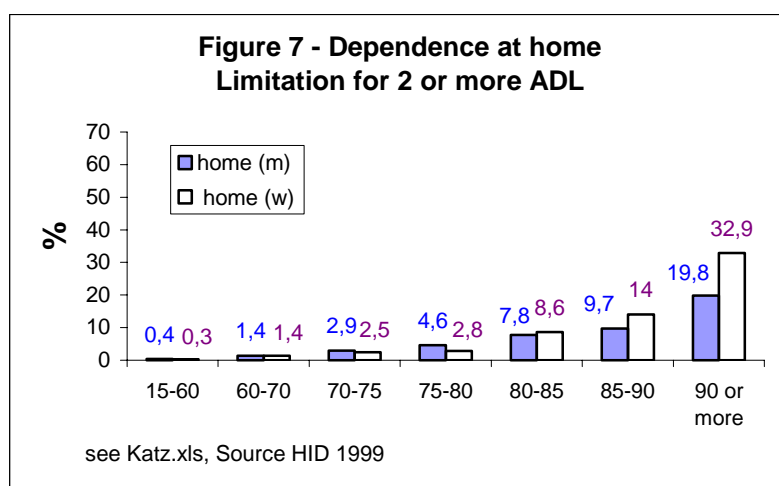
See katz.xls, HID Institutions 1998
 Note:* 32 % of age 60-70 women have two or more dependencies

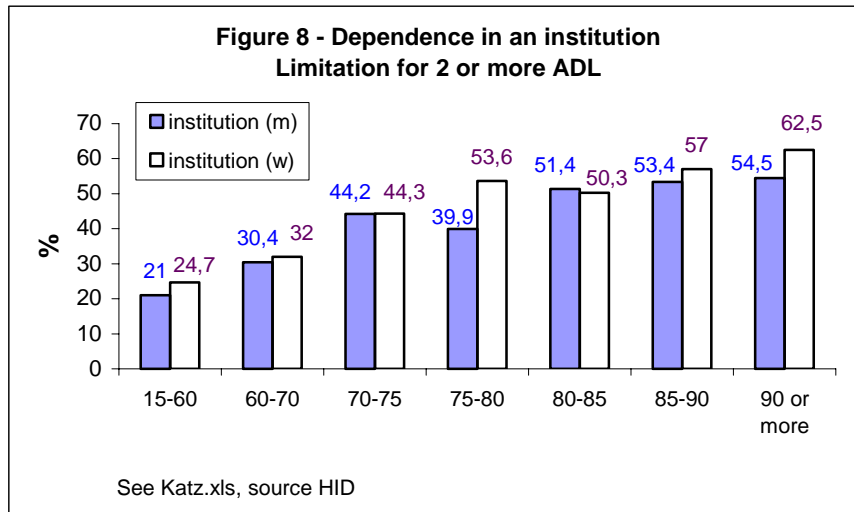
%	15-60	60-70	70-75	75-80	80-85	85-90	90 and more	Total
Men	0,4	1,4	2,9	4,6	7,8	9,7	19,8	1,13
Women	0,3	1,4	2,5	2,8	8,6	14	32,9	1,7

See katz.xls, HID Home 1999

Using the katz index to measure dependence, we compare institutions and home. The Katz indicator implies that women are more dependent than men, at a given age.

Of course, dependence in an institution is more important than at home in particular for the population of under 75 years and dependence at home is growing with age whereas within institutions the increase is less important for older ages (figures 7, 8).





3.2.3 Long-term care in institutions

- Definition

Prevalence rates of incapability for IADL have been defined for men and women for both HID surveys (home and institutions) but with a different definition.

For institutions, the survey provides information on only one IADL (*shopping*) whereas there are three IADL in the 1999 survey.

Then prevalence rate calculation is not the same at home and in institutions. Results are difficult to understand and **must not be compared**.

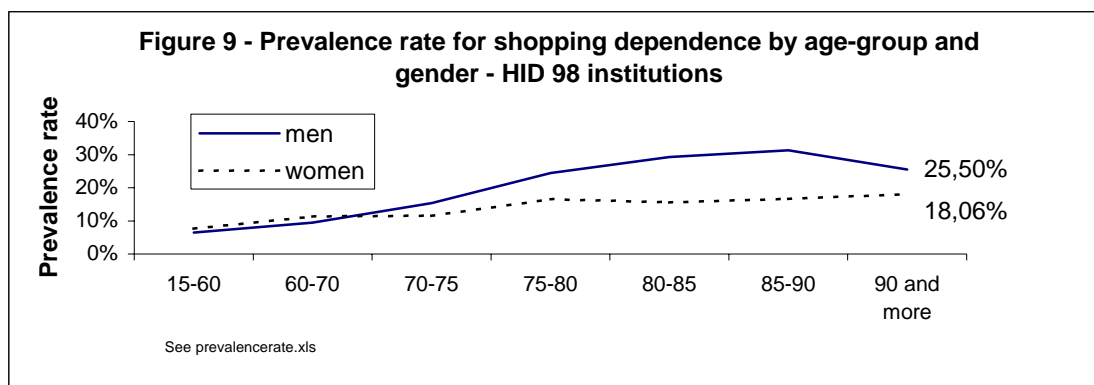
The prevalence for shopping dependence has been defined with the following hypothesis. When she answers “No, I only occasionally do shopping” or “No, I don’t do any shopping”, a person is considered as dependent for IADL shopping (see section 3.2.1 for the detail of possible answers).

In fact, a lot of men do no shopping (that’s different to saying that they are not able to do this activity), and these persons are considered as dependent for shopping. So, the prevalence rate gives a skewed measure of dependence.

- Comments

The prevalence for shopping dependence in institution in 1998 is described in figure 9.

For example, in the 60-70 age-group, the prevalence rate is 10%: This means that 10% of age 60-70 men and women declared not to do their shopping themselves.



3.2.4 Long-term care at home

- Definition

To evaluate the prevalence of dependence for the IADL rate, two cases are defined: because of the answers choice to the question for IADL (see section 3.2.1 for the detail of answers possible), we can define dependence more or less strictly.

Case 1 : For houseworking and cooking IADL variables :
Independence is defined as all “yes” responses (answers 1, 2, 3)

Case 2 : For houseworking and cooking IADL variables :
Independence is defined as all “yes” responses and the “no” response when the person indicates he could do it (cooking or houseworking) if necessary (answers 1, 2, 3, 4).

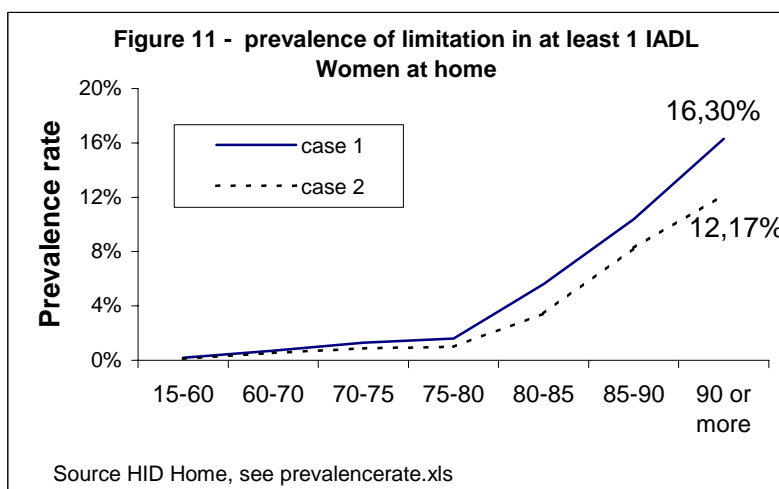
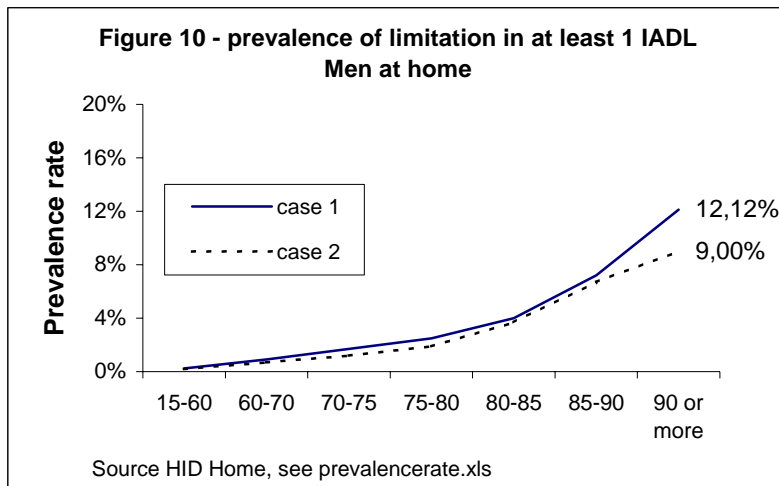
Thus, case 1 defines dependence less strictly. So, it tends to over-evaluate the prevalence.

The prevalence rate at home is the proportion of persons dependent for at least one of the three IADL shopping, houseworking and cooking.

- Comments

Figures 10 and 11 display prevalence rates for at least one of the three IADL at home for men (figure 10) and for women (figure 11) according to the two hypotheses chosen (cases 1 or 2)

Mens’ prevalence rate is more important from age 15 to 80 years than womens’ prevalence rate but after this age the proportion of dependent women is higher. Women are more dependent than men in particular toward the end of their life.



Note that it is not possible to compare HID at home and in institutions because the calculation of prevalence rate is different.

- Need for long term care at home

From the prevalence rate, a population estimation of people needing long term care at home could be tried. So, according our calculations, there would be:

120 000 – 150 000 men according to case 1 or 2

161 000 - 229 000 women according to case 1 or 2
needing long term care at home (see table 10).

Table 10 – Need for long term care at home								
Men-Home 99								
Case 1 2+ adl and at least 1 iadl								
	15-60	60-70	70-75	75-80	80-85	85-90	90 or more	total
Prevalence	0,25%	0,90%	1,70%	2,50%	4,0%	7,20%	12,12%	
Population	17 616 449	2 530 003	1 044 298	847 218	360 824	247 993	112 663	
Freq preval	44 041	22 770	17 753	21 180	14 433	17 856	13 655	151 688
Men-Home 99								
Case 2 2+ adl and at least 1 iadl								
	15-60	60-70	70-75	75-80	80-85	85-90	90 or more	total
Prevalence	0,20%	0,70%	1,20%	1,90%	3,7%	6,70%	9,00%	
Population	17 616 449	2 530 003	1 044 298	847 218	360 824	247 993	112 663	
Freq preval	35 233	17 710	12 532	16 097	13 350	16 616	10 140	121 677
Women-Home 99								
Case 1 2+ adl and at least 1 iadl								
	15-60	60-70	70-75	75-80	80-85	85-90	90 or more	total
Prevalence	0,20%	0,70%	1,30%	1,60%	5,6%	10,40%	16,30%	
Population	17613168	2862417	1379223	1223810	492762,9	550797,5	311282,8	
Freq preval	35 226	20 037	17 930	19 581	27 595	57 283	50 739	228 391
Women-Home 99								
Case 2 2+ adl and at least 1 iadl								
	15-60	60-70	70-75	75-80	80-85	85-90	90 or more	total
Prevalence	0,12%	0,54%	0,87%	0,99%	3,44%	8,28%	12,17%	
Population	17613168	2862417	1379223	1223810	492762,9	550797,5	311282,8	
Freq preval	21 136	15 457	11 999	12 116	16 951	45 606	37 883	161 148

4 Employment

4.1 Data required

Long time-series data about labour force participation of women. Another task is to extract data on the rules and regulations concerning the work of females, notably with respect to part-time work and temporary contracts: rates by gender and age-groups.

Table i

Labour force participation rates by age-groups and gender

Age-groups	Male	Female
0-15		
15-20		
20-25		
25-30		
30-35		
35-40		
40-45		
45-50		
50-55		
55-60		
60-65		
65-70		
70+		
total		

if possible as long time series: 19502000

4.2 Data available

4.2.1 Definitions

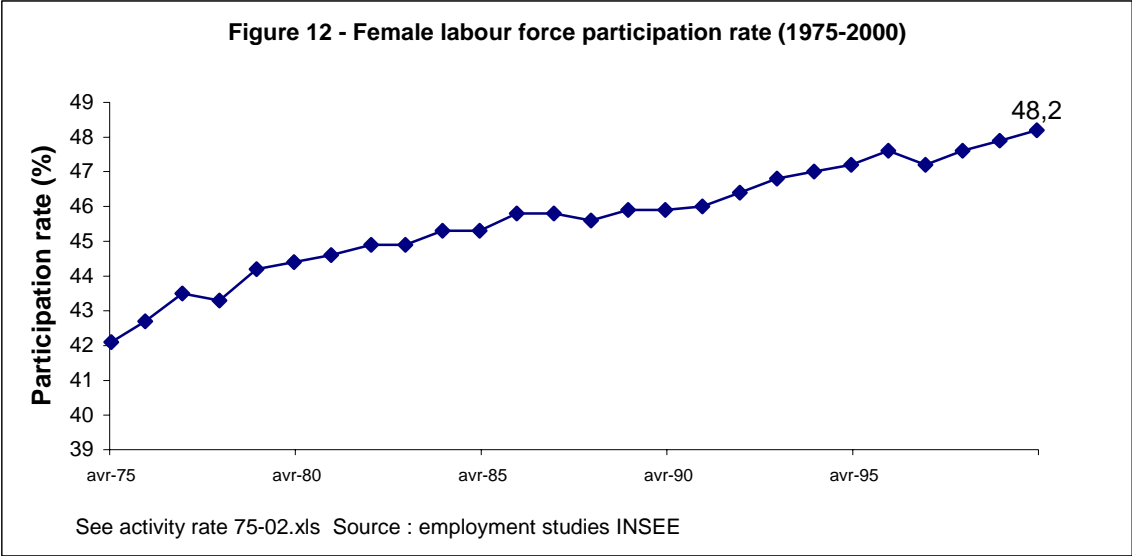
Activity data by age-groups and gender are from annual employment studies “enquête emploi” from INSEE (National Institute of Statistical and Economic Studies, see annex) and active population as the ILO (*International Labour Organization*) definition: population at work or unemployed. So, part-time and temporary contracts concern only the employed population i.e. occupied actives.

In 1982, the part-time definition changed: before 1982, a part-time worker was a person who declared a part-time principal activity, except the unemployed or persons in partial unemployment. Since 1982, a part-time worker is a person who declares a part-time principal activity, except persons in partial unemployment. Since 1985, the partial activity rate raised because of public contracts (TUC and CES).

4.2.2 Activity rate

Activity rates of the French population have been collected by five age-groups and gender, from 1975 up to 2002 in March or April (see tables 11, 12).

Female labour participation continuously increases and today 48 % of women participate in the labour market.



During the same period, the male activity rate fell from 72% to 62%, notably for extreme age-groups (youngest and eldest). France is one of the countries with the lowest activity rates before age 25 and after age 50.

Table 11 – Male activity rate (BIT) by five-year age-groups - "enquêtes emploi" employment surveys 1975-2001

Age-groups (%)	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	>74	total
men														
avr-75	30,4	81,7	95,5	98,3	98,1	97,6	96,1	93,6	83,3	56,8	22,9	11,9	5,4	72,4
mars-76	28,2	82,4	95,7	98,3	98,1	97,5	96,2	93,7	82,9	51,9	21,6	10,9	5	71,8
mars-77	27,5	81,3	95,6	98,2	97,9	97,1	96,1	93,5	84	49,1	19,9	9,3	4,9	71,5
mars-78	25,5	80,3	95,7	98,2	97,9	97,6	95,6	92,9	82,7	45,2	18,3	8,6	4,6	70,9
mars-79	26,5	80,1	95,4	98,1	98,1	97,6	95,6	93	82,3	45,3	16	7,7	3,4	70,8
mars-80	25,7	80,1	95,4	98,1	98,3	97,6	96,6	92,9	81	47,9	14,5	7,5	3,5	70,7
mars-81	24,3	78,1	94,9	98	97,9	97,6	96,4	92,4	79,8	43,1	12,9	6,9	3,2	69,9
avr-82	25,1	78,7	95,3	97,8	98	97,1	95,9	91,4	75,6	40	11,1	5,6	2,7	69,5
mars-83	22,5	79,7	95,3	97,5	98	97,5	95,8	91,6	71	33,7	10,1	5,4	2,3	68,5
mars-84	20	78	94,7	97,1	97,8	97,1	96,1	91,4	68	31,1	11	5,7	2,2	67,7
mars-85	19,5	77,6	94,8	97,2	97,9	97,2	95,9	91,2	67,8	30,8	10,7	4,9	2,1	67,4
mars-86	18,2	76,1	95,2	97,2	97,9	97,3	95,7	90,7	69,4	27,5	9,7	4	2,3	66,9
mars-87	17,2	74,6	95,5	97,1	97,8	97,4	95,4	90,4	67,4	25,8	8,2	4,1	2,2	66,2
mars-88	15,5	70,8	94,4	96,9	97,4	97,6	95,7	90,2	67,4	25,5	8,1	3,8	2	65,4
mars-89	14,9	69,3	94,4	97,2	97,3	97,2	95,5	90,1	68,1	24,2	7,5	3,3	2,1	65,1
mars-90	14,6	65	94	96,8	97	97	96,1	90	67,7	22,8	6,6	2,7	1,7	64,3
mars-91	12,2	62,1	93,9	96,8	97,2	96,8	95,6	89,4	68,6	19,7	6,5	2,7	1,3	63,8
mars-92	11,5	61,3	93,6	96,3	96,5	96,7	95,5	89,8	68,7	19,2	6,1	3	1,3	63,6
mars-93	10	57,7	93,4	96,7	96,8	96	94,5	90,5	67,8	19	5,5	2,8	1,2	63
mars-94	8,7	55,9	93,4	96,8	96,6	96,3	95,1	91	66,4	18	5,1	2,4	0,8	62,7
mars-95	8,8	55,3	92,5	96,7	96,5	96,3	95,1	90,8	66,1	17	4,6	2,4	0,6	62,3
mars-96	9,5	55,4	92,5	96,6	97,1	96,8	95,1	92	67,9	17,2	4,6	2,6	0,8	62,7
mars-97	9,4	54,3	92	96,1	97	96,3	95,1	91,9	68,3	16,1	4	2,2	0,6	62,3
mars-98	11,1	55,1	90,5	95,8	96,3	95,9	94,7	91,2	67,7	16,7	3,6	1,7	0,6	62
mars-99	11,4	55,5	91,7	95,6	96,3	95,5	94,9	90,8	65,8	15,5	3,7	1,7	0,6	62
mars-00	11	56,2	91,9	95,6	96,1	95,6	94,6	90,5	66,9	15,5	3,3	1,4	0,8	61,9

Source : INSEE, employment surveys

Table 12 – Female activity rate (BIT) by five-year age-groups - "enquêtes emploi" employment surveys 1975-2001

Age-groups (%)	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	>74	total
women														
avr-75	23,7	67,5	64,2	59,2	56,9	55,7	55	52,4	44,2	30	11,9	4,7	2,1	42,1
mars-76	22,4	69,2	66,2	60,7	58,3	57,6	56,4	52,3	45,4	28	11,5	4,7	1,8	42,7
mars-77	21,9	69	68,7	62,6	60,5	58,5	57,8	53,1	47	27,7	10,2	4,1	2	43,5
mars-78	19,6	68,6	68,6	64,2	61,7	59,6	57,8	52,6	46,4	24,9	9,8	3,7	1,7	43,3
mars-79	20	68,9	70,1	66,5	63,7	61,3	59,2	53,8	46,6	24,6	8,8	3,9	1,6	44,2
mars-80	18,4	68	70,5	66,9	65	63	59,1	55,4	47,8	27,6	7	2,8	1,6	44,4
mars-81	17,3	67,5	70,3	67,7	66,9	64,8	59,3	57,2	47,2	26	6,3	2,8	1,5	44,6
avr-82	16,7	67,4	71,1	69,5	67,2	65,3	62,6	57,4	46	23,4	4,9	2,4	1,2	44,9
mars-83	15,1	67	73	70,1	67,8	67,4	64,1	56,6	43,7	20,7	4,6	2,7	1	44,9
mars-84	13,7	67	73,4	70,8	69,8	68,5	65,3	57,9	42,8	19	6	2,6	1	45,3
mars-85	12,6	66,1	74	71,1	70,9	70,2	66	57,8	42,7	18,8	5	2,2	1	45,3
mars-86	12,1	65,5	76,6	72,3	72,1	70,8	67	58,9	43	18,4	4,6	1,5	0,9	45,8
mars-87	11,8	64,4	75,6	72,2	72	72,1	67,9	59,7	44,5	18	4,4	1,5	0,8	45,8
mars-88	10	61	75,9	73,1	73	72,7	68	60,3	45,2	17,9	4	1,7	0,6	45,6
mars-89	9,4	59,9	76,4	73,5	73,5	74,1	69	62,1	44,6	17,6	4,2	1,5	0,6	45,9
mars-90	8,1	57,6	77,7	74,6	73,1	75,4	69,1	62,7	45,3	17	3,5	1,3	0,4	45,9
mars-91	6,8	54	78,1	74,5	74,7	76,1	71,3	64,4	45,4	16	3,3	1,1	0,5	46
mars-92	6,5	52,2	78,3	75,4	76,3	76,8	73,4	65,2	45,8	15,2	3,3	0,8	0,4	46,4
mars-93	5,9	49,7	79,2	76,4	77,9	77,6	75,9	65,5	46,6	15	3,4	0,7	0,5	46,8
mars-94	4,7	47,9	79,1	77	77	79	76,9	68,3	46,3	14,9	3,6	0,7	0,3	47
mars-95	4,4	46,9	78,9	78,4	77,6	79,4	77,1	69,9	48,5	14,4	2,9	0,8	0,3	47,2
mars-96	4,4	46,8	77,8	78,6	78,4	80,4	78,2	71,5	49,1	14,8	3,6	0,6	0,2	47,6
mars-97	4,3	44,9	77,7	77	77,7	80,3	78,1	72,1	50	14,4	2,5	0,9	0,2	47,2
mars-98	5,3	44,8	78,3	78	79,4	80,4	79,5	74,6	50,9	14,5	2,2	0,7	0,2	47,6
mars-99	6	46,9	79,3	77,9	79,2	80,6	79,3	73,7	51,9	13,5	2,5	0,5	0,3	47,9
mars-00	6,2	46,9	78,5	78,6	79,6	81,3	79,9	74,2	52	13	2,3	0,7	0,3	48,2

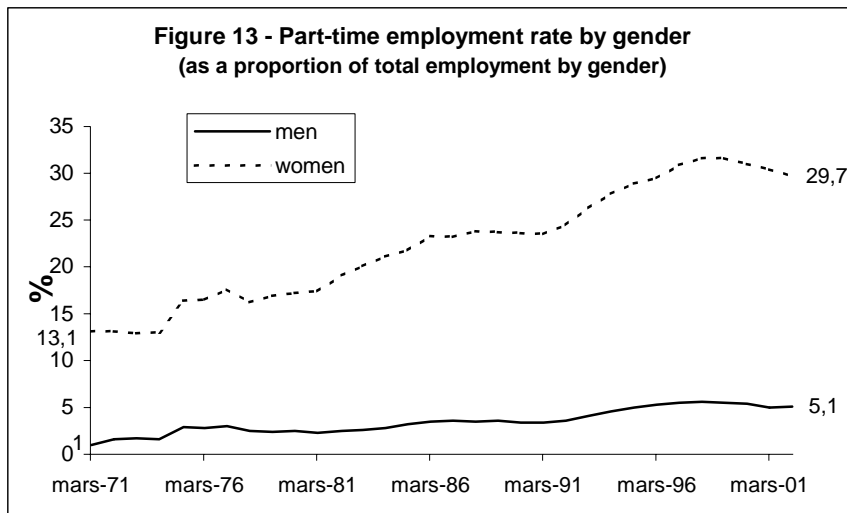
Source : INSEE, employment surveys

4.2.3 Part-time employment

In 2002, part-time activity exceeded 16 % of French employment (table 13). From 1971, the part-time activity rate for men has increased more rapidly than for women rate: it has increased fivefold (from 1% to 5%). However, the gap compared with part-time activity rate for women remains very substantial (since 1971): in 2002, 30% of employed women work part-time compared with only 5% of men (see table 13 and figure 13).

Table 13 – Part-time activity rate by gender (1971-2002)			
(% of employed population)			
	men	women	total
mars-71	1	13,1	5,8
mars-72	1,6	13,1	5,8
mars-73	1,7	12,9	5,9
mars-74	1,6	13	5,9
avr-75	2,9	16,4	8,1
mars-76	2,8	16,5	8,1
mars-77	3	17,6	8,7
mars-78	2,5	16,2	7,9
mars-79	2,4	16,9	8,2
mars-80	2,5	17,2	8,3
mars-81	2,3	17,4	8,4
avr-82	2,5	19,1	9,2
mars-83	2,6	20,1	9,7
mars-84	2,8	21,1	10,3
mars-85	3,2	21,8	11
mars-86	3,5	23,3	11,8
mars-87	3,6	23,2	11,8
mars-88	3,5	23,8	12,1
mars-89	3,6	23,7	12,1
mars-90	3,4	23,6	12
mars-91	3,4	23,5	12,1
mars-92	3,6	24,5	12,7
mars-93	4,1	26,3	13,9
mars-94	4,6	27,8	14,9
mars-95	5	28,9	15,6
mars-96	5,3	29,5	16
mars-97	5,5	30,9	16,8
mars-98	5,6	31,6	17,1
mars-99	5,5	31,6	17,2
mars-00	5,4	31	16,9
mars-01	5	30,4	16,4
mars-02	5,1	29,7	16,2

source : INSEE, employment surveys
see *total part-time activity rate (1971-2002).xls*



As mentioned earlier, activity rates are lower for extreme age-groups (youngest and eldest). Moreover, part-time employment is common in these age-groups (see table 14): part-time rates are substantially larger in the 15-24 and 60 or more age-groups. This pattern is more important for men: in these age-groups, part-time rates are 4 or 5 times more than in others.

Table 14 – Part-time activity rate by ten-year age groups (1998-2002) (% employed)

	15-24	25-39	40-49	50-59	60 or more	Total
Men (%)						
mars-98						5,6
mars-99	16,5	4,8	3,5	4,9	20	5,5
mars-00	13,8	4,6	3,5	5,2	21,3	5,4
mars-01	12,2	4,1	3,6	4,7	20,2	5
mars-02						
Women (%)						
mars-98						31,6
mars-99	41,3	30,6	31,6	30	40,8	31,6
mars-00	35,4	29,8	31,5	29,8	44,9	31
mars-01	34,1	28,8	30,8	30,5	41,6	30,4
mars-02						29,7
Total (%)						
mars-98						17,1
mars-99	27,2	16,3	16,3	16	29,6	17,2
mars-00	23,2	15,9	16,2	16,1	32,2	16,9
mars-01	21,5	15,1	16,1	16,2	30	16,4
mars-02						16,2

see *Part-time activity rate (1998-2002).xls*.

Source : employment surveys, INSEE, scope : active employment

4.2.4 Temporary contracts

Temporary contract rates have increased more for women than for men, and more for younger people (table 15).

So, female labour force participation has increased but jobs are often precarious: women sign part-time and/or temporary contracts more often. Indeed, temporary contracts are often part-time jobs.

Table 15 - Temporary contracts by gender and age-groups (1982 to 1997) (% employed)

	15-24	25-39	40 or more	total
Men (%)				
avr-82	5,5	1,3	0,6	1,6
Mars-83	4	0,9	0,6	1,2
Mars-84	4,3	1,1	0,5	1,3
Mars-85	6,5	1,4	0,8	1,8
Mars-86	8,2	1,4	0,7	1,9
mars-87	10,8	2	0,7	2,6
mars-88	11,4	2,5	0,9	2,9
mars-89	11,5	2,7	1	3
mars-90	11	2,6	0,9	2,8
mars-91	9,2	2,7	0,9	2,5
mars-92	10,3	2,9	1	2,8
mars-93	10,1	2,9	1,2	2,7
mars-94	11,3	3,3	1,1	2,9
mars-95	12,4	4,3	1,5	3,6
mars-96	12,9	4,1	1,7	3,6
mars-97	14,2	4,4	1,8	3,9
	15-24	25-39	40 or more	total
Women (%)				
avr-82	5,5	1,4	0,7	1,8
mars-83	5,7	1,3	0,7	1,8
mars-84	5,7	1,4	0,5	1,8
mars-85	5,5	1,5	0,7	1,8
mars-86	7,5	1,9	1,2	2,5
mars-87	9,8	2,1	1,1	2,8
mars-88	10,3	2,8	1,2	3,2
mars-89	12,4	3,3	1,5	3,8
mars-90	11,3	3,5	1,5	3,6
mars-91	10,9	3,4	1,4	3,4
mars-92	11,7	3,3	1,6	3,5
mars-93	14,3	3,8	1,8	3,9
mars-94	13,6	3,8	1,8	3,7
mars-95	15,7	4,6	2,1	4,3
mars-96	16,5	5,3	2,2	4,6
mars-97	19,5	5,7	2,3	5

	15-24	25-39	40 or more	total
Total (%)				
avr-82	5,5	1,4	0,6	1,7
mars-83	4,8	1,1	0,6	1,5
mars-84	5	1,2	0,5	1,5
mars-85	6,1	1,4	0,7	1,8
mars-86	7,8	1,6	0,9	2,2
mars-87	10,4	2,1	0,9	2,7
mars-88	10,9	2,6	1	3
mars-89	11,9	3	1,2	3,4
mars-90	11,1	3	1,2	3,2
mars-91	10	3,1	1,1	2,9
mars-92	10,9	3,1	1,2	3,1
mars-93	12,1	3,3	1,4	3,3
mars-94	12,4	3,5	1,4	3,3
mars-95	13,9	4,4	1,8	3,9
mars-96	14,6	4,7	1,9	4,1
mars-97	16,6	5	2	4,4

See *temporary contracts (1982-1997).xls*
Source : employment surveys INSEE

5 Households

5.1 Data required

Long time-series data on marital status: population by gender and age-groups and marital status (single, married, divorced, widowed)

Long time-series data on family structure: single adult with children, married with children, married without children (by gender and age-groups), single elderly person living within their children's family.

Long time-series data on household composition: one-person household, 2-Person-Household, 3-Person-HH, 4-Person-HH; 5 or more Person-HH.

5.2 Data available

Annual surveys of employment (INSEE employment surveys, see annex) provide population data about marital status, household composition and family structure.

These surveys study the population over 15 years. All members of the household studied (even those aged less than 15) are questioned about their family connections with the head of household and marital status.

The relevant results from the 1990, 1995, 1999, 2000 and 2001 surveys were sent to DIW.

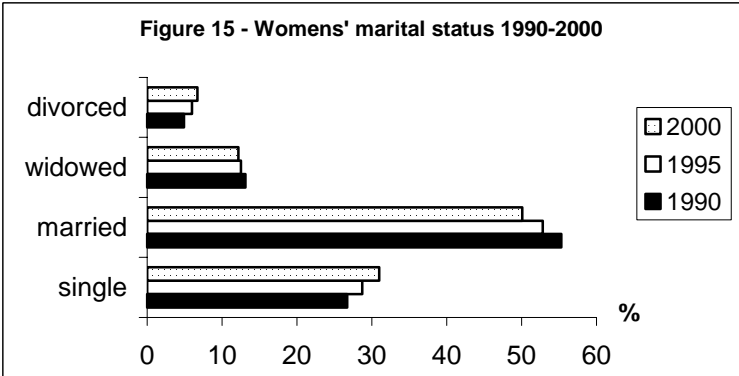
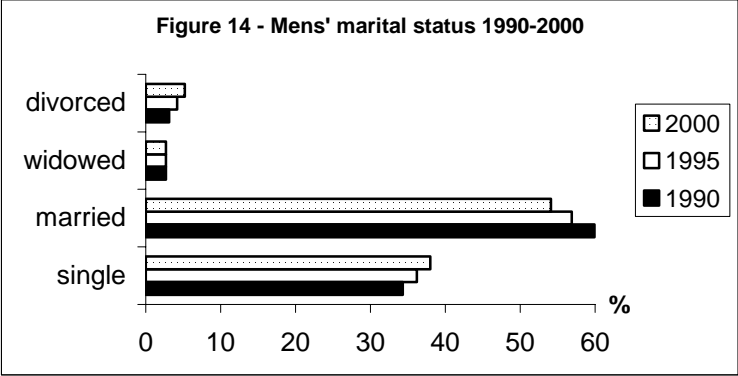
5.2.1 Marital status

Marital status is the legal definition (see table 16 as an example): Single, married, widowed or divorced. Non-married people living as a couple are not taken into account as married: they are counted as two single people.

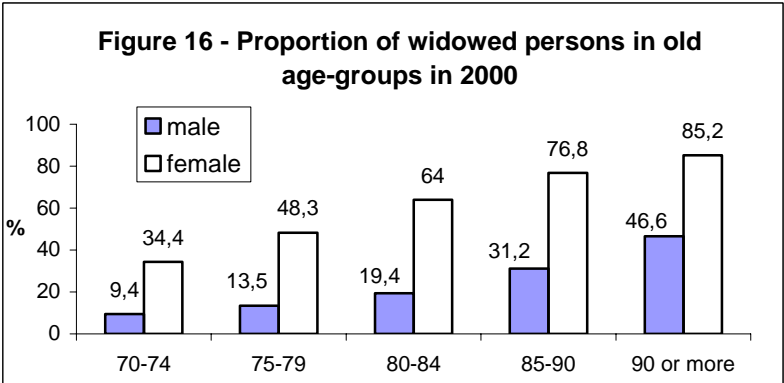
Age-group	Men				Women			
	single	married	widowed	divorced	single	married	widowed	divorced
%								
15-19	99,7	0,3	0	0	99,3	0,7	0	0
20-24	98	2	0	0	93	6,8	0	0,2
25-29	79,5	20	0	0,5	65	33,6	0,1	1,3
30-34	53,5	44,2	0,1	2,2	43	53,1	0,3	3,6
35-39	35,2	59,1	0,3	5,4	28,4	63,5	0,4	7,7
40-44	24,1	67,4	0,4	8,1	17,9	69	1,6	11,5
45-49	16	72,6	0,8	10,6	12,2	71,4	2,9	13,5
50-54	10,1	78,6	0,9	10,4	8,5	72,8	5,2	13,5
55-59	7,8	80,1	2,4	9,7	6,6	73	7,9	12,5
60-64	7,3	82,2	3,5	7	5,7	70,6	14,3	9,4
65-69	7	81,8	5,8	5,4	5,8	63,1	23,7	7,4
70-74	7,4	78,4	10,2	4	5,3	55,5	34,9	4,3
75-79	7	76,4	13,3	3,3	6,1	41,8	48,3	3,8
80-84	4,5	73,4	20	2,1	6,2	28	62,7	3,1
85-90	3,2	64,8	30,5	1,5	4,9	14,3	77,8	3
90 or more	3,7	47,8	47,7	0,8	4,9	6,9	86,3	1,9
total	38	54,2	2,8	5	31,1	50,1	12,2	6,6

See *marital status- tablef.xls*, Source: INSEE
 Note: 99,7% of men aged 15-19 were single in 2001, 0,3% were married.

Table 16 displays marital status in the population in 2001. The total male population is divided into : 38% single, 54% married, 3% widowed and 5% divorced. The gender distribution is quite similar but the proportion of married and single men are slightly higher than for women (figures 14, 15).



The porportion of widowed persons permit us to focus on the relative over-mortality of men: in 2000, in the 90 or more age-group, 85,2 % of women are widowed compared with 46,6 % for men (see figure 16).



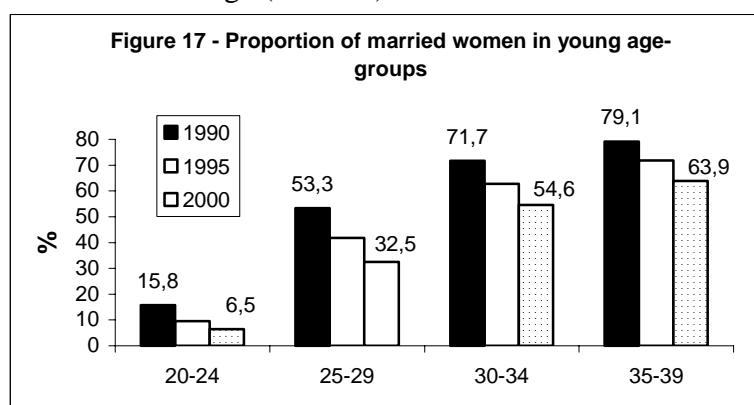
In table 17, 2001 and 1990 rates are compared to display marital status evolution over ten years.

Age-group	Men				Women			
	Single	married	widowed	divorced	single	married	widowed	divorced
15-19	0%	-25%	-100%		0%	0%		
20-24	3%	-60%	-100%	-100%	11%	-57%	-100%	-33%
25-29	30%	-47%		-50%	48%	-37%	-50%	-48%
30-34	67%	-32%	-50%	-29%	96%	-26%	-25%	-40%
35-39	88%	-22%	50%	2%	135%	-20%	-56%	-3%
40-44	94%	-17%	0%	33%	99%	-13%	-11%	13%
45-49	54%	-13%	0%	89%	126%	-12%	-22%	35%
50-54	15%	-8%	-25%	121%	42%	-9%	-13%	78%
55-59	-15%	-5%	-11%	155%	8%	-4%	-34%	105%
60-64	-14%	-2%	-20%	106%	0%	0%	-26%	96%
65-69	-9%	-1%	-15%	69%	-12%	5%	-20%	106%
70-74	21%	-4%	1%	90%	-21%	13%	-15%	26%
75-79	19%	-2%	-6%	65%	-8%	14%	-10%	23%
80-84	-21%	5%	-15%	91%	-3%	18%	-6%	7%
85-90	-11%	7%	-13%	88%	-17%	16%	-4%	200%
90 or more	3%	6%		-73%	-16%	50%	-2%	19%
total	11%	-10%	4%	61%	16%	-9%	-7%	35%

Note : The share of single men increase of 11% between 1990 and 2001 (it has grown from 33,4% in 1990 to 38% in 2001)

During the 1990-2001 period, the married proportion declined in the population while the proportion of single and divorced increased (table 17).

Also, the share of married for the young generation goes down further because of marriage age postponement and the drop of marriage numbers (figure 17). The proportion of married persons fall significantly in the 20-24 age group: 15,8 % of 20-24 age group women in 1990 were married but only 6,5 % in 2000 and 6,8 in 2001. On the other hand, the proportion of married persons increased in old age (table 17).



5.2.2 Household composition

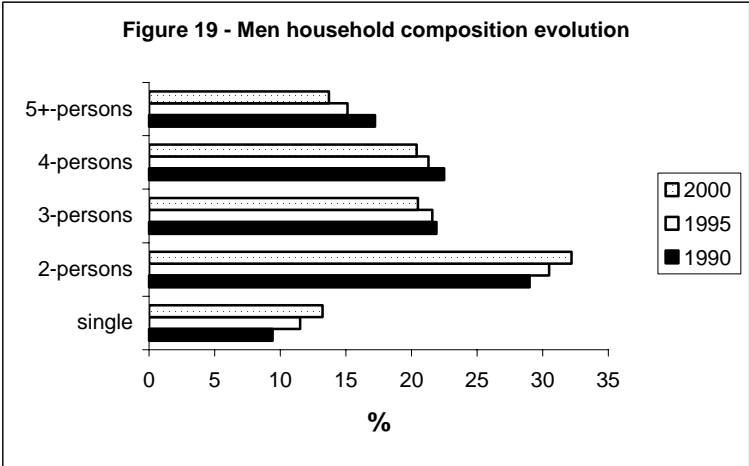
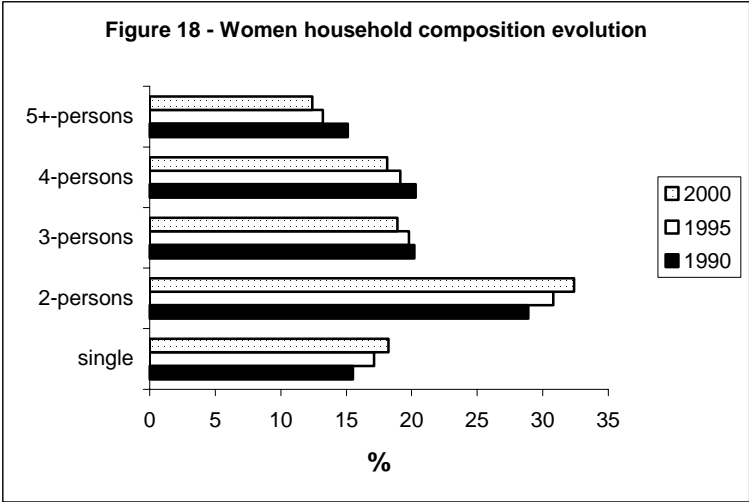
Household composition as single-person household, 2-Person-HH, 3-Person-HH, 4-Person-HH and 5 or more Person-HH is given for 1990, 1995, 1999, 2000 and 2001. See Table 18 as an example.

Table 18 - Population by age-groups, gender and household composition % - 2001

Age-group	Men						Women					
	single	2-persons	3-persons	4-persons	5+-persons	total	single	2-persons	3-persons	4-persons	5+-persons	total
15-19	1,1	5,5	19,1	37,4	36,9	100	1,8	6,6	18,8	35,7	37,1	100
20-24	13,4	15,8	23,5	25,7	21,6	100	14,9	25,4	22,8	19,6	17,3	100
25-29	19,5	33,9	24,5	14,3	7,8	100	14,6	36,6	27,5	14,1	7,2	100
30-34	15,9	22,9	29,1	23,8	8,3	100	10,2	19,5	27,5	30,1	12,7	100
35-39	13,5	13,1	22	33,9	17,5	100	7,6	13,1	20	36,1	23,2	100
40-44	13	11,4	18	34,9	22,7	100	6,2	12,6	22	35,8	23,4	100
45-49	11,4	16,9	23,7	30,1	17,9	100	8,3	24,4	28,1	24,7	14,5	100
50-54	11,4	32,4	27,5	18,6	10,1	100	12,3	42,8	26,8	12,7	5,4	100
55-59	12,2	51	22,8	8,7	5,3	100	16,7	57,9	17,2	5,9	2,3	100
60-64	12,8	64,4	14,5	4,7	3,6	100	21,5	63,8	10,8	2,4	1,5	100
65-69	13,8	70,9	10,9	2,4	2	100	28,6	61,9	7,1	1,6	0,8	100
70-74	17,2	73,4	6,7	1,6	1,1	100	37	56,2	5	1,1	0,7	100
75-79	18,5	73,1	6,6	1	0,8	100	49,4	45,4	3,8	0,7	0,7	100
80-84	22,5	71,5	4,8	0,9	0,3	100	62,6	31,8	3,7	1,3	0,6	100
85-90	28,3	64,5	5,7	1,2	0,3	100	71,7	20,9	4,6	1,8	1	100
90 or more	43,1	47,6	5,7	2,9	0,7	100	68,3	17,2	10,6	2,6	1,3	100
total	13,4	32,6	20,2	20,5	13,3	100	18,6	32,6	18,9	18,1	11,8	100

See *household-tableh.xls* –Source: INSEE

Households have become smaller and smaller (figures 18, 19, table 19). During the period 1990-2000, the share of three or more persons households fell compared with households composed of one or two persons. Indeed, the 1 or 2 person households share increased from 1990 to 2001 whereas the multiple occupancy households share dropped.



In table 19, 2001 and 1990 rates are compared to display household composition evolution over ten years.

The share of elderly in multiple occupancy households fell and it became more common to live alone at old age: the share of persons aged 90 or more living in single person households increased 30% over ten years.

The increase in life expectancy seems not to imply an increase in number of generations in each household (cohabitation with elderly) but an increase in single (or 2-person) households.

Table 19 – Household composition evolution from 1990 to 2001 (by gender and age-groups)

Age-group	Men					Women				
	single	2 p	3 p	4 p	5+ p	single	2 p	3 p	4 p	5+ p
15-19	38%	28%	0%	5%	-8%	100%	32%	6%	-1%	-7%
20-24	63%	0%	-3%	1%	-18%	55%	-6%	-6%	-6%	-6%
25-29	51%	9%	-17%	-11%	-26%	38%	27%	-6%	-31%	-33%
30-34	43%	29%	6%	-18%	-43%	42%	35%	13%	-11%	-37%
35-39	63%	14%	3%	-5%	-24%	62%	24%	-7%	-1%	-13%
40-44	78%	6%	-16%	-3%	-7%	17%	-7%	-9%	7%	0%
45-49	44%	8%	-8%	3%	-17%	36%	9%	-1%	-8%	-10%
50-54	46%	8%	0%	-11%	-28%	48%	10%	-4%	-18%	-42%
55-59	36%	12%	-9%	-26%	-38%	25%	11%	-18%	-30%	-53%
60-64	27%	9%	-23%	-33%	-27%	9%	8%	-23%	-43%	-44%
65-69	17%	3%	-18%	-37%	-20%	-2%	7%	-22%	-30%	-56%
70-74	34%	-1%	-26%	-20%	-50%	-6%	12%	-22%	-45%	-65%
75-79	14%	1%	-13%	-47%	-58%	-1%	13%	-32%	-59%	-71%
80-84	-2%	11%	-31%	-67%	-88%	6%	9%	-36%	-58%	-76%
85-90	-1%	16%	-37%	-73%	-88%	19%	-4%	-53%	-62%	-72%
90 or more	28%	14%	-58%	-55%	-84%	34%	-22%	-37%	-49%	-75%
total	43%	12%	-8%	-9%	-23%	20%	13%	-6%	-11%	-22%

5.2.3 Family structure

The French population family structure is described in this section.

The population is split into single adult with child(ren), married with child(ren), married without children, by gender and age-groups. No data were found for single elderly persons living within their children's family.

Table 20 presents family structure for 2001.

Age-group	Men				Women			
2001	married with children	married without children	single with children	single without children	married with children	married without children	single with children	single without children
15-19	0,2	0,1	97,2	2,5	0,3	0,3	95,4	4
20-24	0,9	1,2	73,3	24,6	3,5	3,4	59,6	33,5
25-29	11,7	8,4	36,3	43,6	22,9	11,2	28,7	37,2
30-34	36,9	8,4	25,6	29,1	48,5	6,8	25,4	19,3
35-39	56,9	5,8	19,2	18,1	65,1	4	19,2	11,7
40-44	67,8	5,9	12,6	13,7	73,5	5,9	12,8	7,8
45-49	69,9	12,1	7,4	10,6	67,9	17,6	6,7	7,8
50-54	57	31,6	3,2	8,2	47,2	42,4	3,4	7
55-59	37	54,1	1,8	7,1	25,6	66,2	1,6	6,6
60-64	21,1	70,8	1,1	7	13,4	79,2	0,5	6,9
65-69	12,1	80	0,6	7,3	7,7	83,9	0,9	7,5
70-74	7,5	83,9	0,3	8,3	5,9	85,4	0,4	8,3
75-79	6,1	85,5	0,3	8,1	3,5	83,8	0,4	12,3
80-84	4,3	90	0	5,7	4,6	77,2	0,1	18,1
85-90	5,1	90,3	0,3	4,3	1,4	73	0,6	25
90 or more	5,7	87,2	0	7,1	6,5	52	0	41,5
total	31,9	26,9	25,4	15,8	33,8	27,9	23,9	14,4

See *familystructure-tableg.xls*, Source INSEE

Table 21 shows family structure evolution over ten years (from 1990 up to 2001).

In the last decade, the share of married people with children reduced while the share of single people without children increased for the 20-50 years age-groups.

Single people with children increased the most in the 20-50 age-groups: it is the huge development of one-parent family. This feature is more important for women who have more often become the head of household.

The share of the elderly still married (85 years or more) has also increased.

Age-group	Men				Women			
	married with children	married without children	single with children	single without children	married with children	married without children	single with children	single without children
15-19	0%	-50%	0%	-7%	50%	50%	0%	5%
20-24	-59%	-56%	-2%	23%	-58%	-55%	6%	20%
25-29	-54%	-36%	14%	46%	-44%	-18%	35%	55%
30-34	-35%	-14%	63%	67%	-30%	-4%	119%	64%
35-39	-23%	-12%	100%	77%	-20%	-30%	170%	89%
40-44	-15%	-17%	107%	93%	-10%	-28%	184%	37%
45-49	-7%	-12%	111%	39%	-8%	-12%	219%	86%
50-54	-5%	4%	28%	21%	-10%	5%	89%	37%
55-59	-12%	12%	-10%	-9%	-20%	10%	7%	10%
60-64	-20%	10%	-21%	-10%	-28%	7%	-55%	8%
65-69	-19%	5%	-14%	-6%	-22%	4%	-18%	-14%
70-74	-25%	1%	0%	24%	-26%	7%	-20%	-28%
75-79	-26%	1%	-40%	23%	-39%	6%	-20%	-17%
80-84	-45%	6%	-100%	-20%	5%	4%	-93%	-9%
85-90	-43%	6%	0%	-19%	-75%	18%	-79%	-16%
90 or more	-52%	8%		-5%	55%	31%	-100%	-17%
total	-18%	8%	3%	35%	-18%	7%	13%	26%

Note : the share of married men with children decreased by 18% between 1990 and 2001 (from 38,7% in 1990 to 31,9% in 2001)

6 Annex

6.1 National survey on health and national health insurance

In French, *Enquête Santé et Protection sociale (ESPS)*

yearly survey

Organizations in charge of the survey

CREDES and the statistics department of the CNAMTS (National Health Insurance Fund for Salaried Workers)

Survey's focus

- Public coverage and private supplementary health insurance
- Reported diseases and disorders
- Recourse to a physician
- Consumption of medical goods and services
- Care and services administered by non-physician clinicians
- Hospitalization
- Reasons for not seeking care and opinions about health

Principal characteristics

Surveys dates

1998, 2000

The survey is undertaken in two waves (spring and fall).

Scope of the survey

- ESPS 1998-2000: Households including at least one beneficiary of one of the main national health insurance funds (for salaried workers, farmers, or the self-employed), and who live in France (overseas territories excluded).

The principal questionnaire (socio-demographic data on the household to which the randomly chosen beneficiary belongs) is answered by phone (4 calls). For those with unlisted numbers or without phones, interviewers make two house calls to conduct the survey.

Four questionnaires mailed to the sample population are to be filled out and returned by mail (or handled by interviewers for people with unlisted phone numbers or no phone). These four questionnaires concern morbidity, hospitalization, recourse to a treatment center for the handicapped or disabled, and supplementary health insurance.

A medical consumption record kept by the patient over a three-week period of time. The records are sent by mail or handled by an interviewer.

6.2 Handicaps, Impairments, Dependence Survey (HID)

In France, concerning disability data, there is a recent survey carried out by INSEE since 1998.

INSEE

Survey periods : late 1998 and late 2000 for HID data collected in institutions

late 1999 and late 2001 for HID data collected at home

Scope: all population (individuals with disabilities over-represented but representative after weighting)

Survey's focus:

Cause and origin of disabilities

Description of disabilities

Social and family environment

Technical aids and housing adjustments

Housing conditions

Trips

Education and degrees

Employment

Income and administrative situation

Leisure activities, holidays, culture

Main carer (at home)

The particularity of this survey is that individuals with incapacities are over-represented. Nevertheless, the representativity can be corrected after weighting.

Two surveys are available :

- HID in institutions in 1998 (with weighting : 220 000 men and 419 000 women)

- HID at home in 1999 (with weighting : 22,7 millions of men and 24,4 millions of women)

In fact, this survey is composed of two samples of individuals :

- The first sample is concerning people living in institutions (medical or not). 15 000 individuals have been interviewed twice, in 1998 and in 2001. Close to 70% of the first sample have been interviewed in the second wave. Some died between the two dates and the others came back home.

- The second sample is concerning people living at home. 17 000 individuals have been interviewed twice, in 1999 and in 2002.

The first wave of the INSEE survey HID was carried out in late 1998. It covered a sample of about 15 000 people living in institutions, even temporarily, as is the case with many people treated for mental illness.

The institutions included homes for the elderly, homes for young and adult persons with disabilities, and psychiatric institutions. The same persons were surveyed again in late 2000.

“The HID survey (in French: Handicaps-Incapacités-Dépendance [HID]) looks at the effects of health problems on people's physical integrity, daily living, and social relationships. The emphasis is on social issues rather than medical ones—specifically, the technical and human assistance needs, and the assistance actually provided. The survey paints a broader picture of the health field without overstepping its bounds.” [*Extract from Mormiche 2001*]

In this survey, information about perceived disabilities is very rich. In particular, many mobility indicators are detailed, like abilities to dress oneself, to wash oneself, to drink and eat without assistance...

These data allow the calculation of three subjective indicators about psychological dependency and physical incapacity.

However, although this survey is rich in perceived health status indicators, there is little objective information. We can only find an individual invalidity rate used by official services of social security in France to set social benefits.

Finally, the HID survey contains many personal characteristics too, like education, household income and social situation.

6.3 INSEE Employment surveys

Enquête Emploi (INSEE)

Thèmes	Population active ; Emploi ; Chômage ; Marché du travail ; Activité professionnelle ; Durée du travail ; Précarité ; Recherche emploi ; Mobilité professionnelle ; Mobilité sociale ; Formation
Enquêtes disponibles	Toutes les enquêtes annuelles dans les séries 1968 - 1974 ; 1975 - 1981 ; 1982 - 1989 ; 1990 - 2002.
Périodicité	Enquête annuelle. L'enquête a lieu au mois de mars de chaque année ; cependant, les années de recensement l'enquête a lieu soit un peu plus tard (1968, 1975, 1982), soit un peu plus tôt (1990). Les recensements sont l'occasion de renouveler le questionnaire et l'échantillon. On obtient ainsi des séries homogènes.
Historique	L'enquête a été réalisée pour la première fois en 1950.
Objectif	Description de la situation de l' emploi en mars de chaque année. L'enquête permet d'étudier la structure et l'évolution de la population active , d'analyser le chômage et le fonctionnement du marché du travail . L'enquête fait partie du dispositif communautaire (Eurostat) d'enquêtes sur les forces de travail.
Unité observée	Ménages ordinaires et toutes les personnes qui leur sont rattachées. Sont explicitement exclues les personnes des établissements hospitaliers, scolaires et hôteliers vivant en collectivité ainsi que les membres des communautés religieuses.
Population	Ensemble des personnes de 15 ans et plus.
Localisation	France métropolitaine, National
Taille échantillon	Pour la série 1968-1974 : environ 60 000 individus. Pour la série 1982-1989 : environ 150 000 individus issus de environ 80 000 ménages. A partir de 1990 : environ 135 000 individus issus de environ 65 000 ménages
Plan de sondage	Échantillon aréolaire avec renouvellement partiel (par tiers) chaque année. Chaque logement est enquêté 3 fois. La réserve d'aires est constituée à partir des recensements de la population (1968, 1975, 1982, 1990).
Taux de sondage	1/100 ^{ème} pour l'enquête de 1968. 1/300 ^{ème} ultérieurement.

Organisation questionnaire

Niveau logement

- Catégorie et type de logement
- Liste de toutes les personnes occupant le logement
- Pour chaque habitant (y compris de moins de 15 ans) : information socio-démographique (lien avec le chef de ménage, sexe, nationalité, état matrimonial, date de naissance, à partir de 1990 département ou pays de naissance)
- Présence de domestique ou de pensionnaire.

Niveau individuel

- **Occupation principale** à la date de l'enquête (emploi, sans emploi, étudiant, militaire du contingent, retraité)
- Activité professionnelle principale
 - * profession principale
 - * statut professionnel (exploitant agricole, profession libérale, employeur, travailleur indépendant, travailleur à domicile, apprenti, salarié)
 - * agent de l'État ou de collectivité locale
 - * niveau de qualification
 - * fonction principale (à partir de 1990)
 - * nature et secteur d'activité de l'établissement
 - * ancienneté
 - * type d'activité (régulière, saisonnière, occasionnelle)
 - * nature du contrat de travail (depuis 1990)
 - * activité à temps plein ou à temps partiel (à partir de 1971)
 - * durée effective du travail
 - * durée habituelle du travail
 - * horaires de travail (à partir de 1990)
 - * salaire mensuel (à partir de 1990)
- Activité professionnelle marginale (à partir de 1990)
- Activité professionnelle antérieure (à partir de 1990)
- **Recherche d'emploi**
 - * nature de l'emploi recherché
 - * disponibilité
 - * mode de recherche d'emploi
 - * durée de la recherche d'emploi
 - * circonstances de la recherche d'emploi
 - * motifs de non recherche (à partir de 1990)
 - * souhaits d'emploi (à partir de 1990)
 - * allocations de chômage
- **Formation**
 - * date de fin d'étude
 - * diplôme d'enseignement général le plus élevé
 - * diplôme professionnel ou technique le plus élevé
 - * niveau de formation (à partir de 1990)
 - * formation en cours (à partir de 1990)
- **Mobilité professionnelle**
 - * situation professionnelle à la date de l'enquête précédente (pour le tiers entrant)
- **Mobilité sociale**
 - * situation professionnelle du père à la fin des études de l'enquêté (à partir de 1982)

Recueil des données

Étalement sur 4 semaines des enquêtes (à l'exception de l'enquête de 1968 qui s'est étalée sur près de 3 mois) Les taux de refus fluctuent entre 1,2% et 3,1% pour la série 1969 - 1974 et entre 2 et 3% pour les séries ultérieures. Le redressement des non réponses se fait par remplacement d'un logement défaillant par un logement présentant des caractéristiques similaires. Le redressement des erreurs aléatoires se fait par utilisation des données du recensement et les coefficients d'extrapolation appliqués sont repris chaque année. L'enquêteur n'est pas obligé d'interroger personnellement chacun des membres du ménage ; une des personnes présentes dans le logement peut répondre pour les autres.