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As the world faces the challenges of an increasingly aged population, this study examines the attitudes and experiences of those age sixty-five and older in five nations: the United States, Canada, the United Kingdom, western Germany, and Japan. Commissioned by the Commonwealth Fund Commission on Elderly People Living Alone and conducted by Louis Harris and Associates in 1991, the survey was undertaken to illuminate issues critical to the well-being of older people, including satisfaction with life, opportunities for social interaction and community support, and expectations and use of medical care.

This study provides new insights into the problems and attitudes of elderly U.S. residents by comparing their attitudes and experiences with those of elderly people in other highly industrialized and technologically advanced countries. Each of the five countries has a well-developed and relatively comprehensive social welfare system that provides retirement pensions and health care coverage for elderly citizens. With regard to health coverage, the population over age sixty-five is particularly interesting because almost all elderly Americans have government-sponsored health insurance coverage under Medicare—making the United States similar to the other nations in this regard. The same cannot be said for the nonelderly population.

The study results reveal a great deal of commonality in the experiences of elderly people across the five nations but also show striking differences. Most notably, the fear of the cost of health care is astonishingly different for elderly people in the United States compared with their counterparts in the other four nations.

**Survey design and methods.** A cross-section of approximately 900 people age sixty-five and older were interviewed in each of the five countries: the United States (910 interviews), Canada (930 interviews),...
the United Kingdom (940 interviews), western Germany (948 views), and Japan (900 interviews). The survey took place on the eve of German unification and does not include interviews with elderly people from what was then considered East Germany.

The survey was conducted directly by Louis Harris and Associates in the United States and the United Kingdom and under contract with a local surveying firm in the other three countries. The sampling methods used a two-stage random sampling design to obtain a nationally representative sample in each country. The interviews were conducted from February through May 1991. Telephone interviews were used in the United States and Canada and in-person interviews in the United Kingdom, Germany, and Japan, because of the relatively low proportion of the population with home telephones in the latter three countries. Response rates were 70 percent for the United States, 79 percent for Canada, 95 percent for the United Kingdom, 88 percent for Germany, and 89 percent for Japan.

The survey questionnaire was developed by the Commonwealth Fund Commission on Elderly People Living Alone and Louis Harris and Associates. Interviews were conducted with household members age sixty-five or older who represented the entire household. Interviewees were asked to respond to questions about their life and living arrangements, daily activities, social and family contacts, work, life satisfaction, family and informal support, access to and use of health care services, and attitudes toward health services and the health system. Survey results have been weighted to provide estimates that are representative of the full elderly population in each country. The U.S. data were weighted by education, age, race, sex, region, and size of place. Data from the other countries were weighted by age and sex to reflect actual proportions that exist in each population.

### Profile Of The Elderly

Although the size of the total population varies significantly across the survey countries, the elderly represent a significant share of each country’s total population, constituting 16 percent of the population in Germany and the United Kingdom, 12 percent in the United States, and 10 percent in Japan and Canada. Among the nations studied, the United States has the largest population, the lowest life expectancy at birth, and the highest level of health spending as a percentage of gross domestic product (GDP). Japan has the longest life expectancy and among the lowest percentages of GDP devoted to health.

This survey reveals common characteristics but also demonstrates the
uniqueness of each of the countries. All five countries have similar age composition for their elderly populations, with over half of the elderly population in the group ages sixty-five to seventy-four (Exhibit 1). Those age eighty-five and older in the survey represent 7 percent of US. elderly people, with comparable levels in the other countries. The exception is Japan, where the percentage age eighty-five and older is only 4 percent. Germany has the oldest age distribution, with nearly half its elderly age seventy-five or older.

The majority of the elderly population are women in all five nations. In all but Germany six of every ten elderly people are women. Germany

<table>
<thead>
<tr>
<th>Exhibit 1</th>
<th>Population Profile Of The Elderly In Five Nations, 1991</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>United States</td>
</tr>
<tr>
<td>Total population age 65 and older (millions)</td>
<td>30.4</td>
</tr>
<tr>
<td>Age</td>
<td>65-74</td>
</tr>
<tr>
<td></td>
<td>75-84</td>
</tr>
<tr>
<td></td>
<td>85 and older</td>
</tr>
<tr>
<td>Sex</td>
<td>Male</td>
</tr>
<tr>
<td></td>
<td>Female</td>
</tr>
<tr>
<td>Marital status</td>
<td>Widowed</td>
</tr>
<tr>
<td></td>
<td>Married</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
<tr>
<td>Education</td>
<td>Less than high school</td>
</tr>
<tr>
<td></td>
<td>Completed high school</td>
</tr>
<tr>
<td></td>
<td>Post-high school</td>
</tr>
<tr>
<td>Living arrangement</td>
<td>Alone</td>
</tr>
<tr>
<td></td>
<td>With spouse</td>
</tr>
<tr>
<td></td>
<td>With children/others</td>
</tr>
<tr>
<td>Residential stability</td>
<td>Fewer than 10 years in community</td>
</tr>
<tr>
<td></td>
<td>10-29 years in community</td>
</tr>
<tr>
<td></td>
<td>30-49 years in community</td>
</tr>
<tr>
<td></td>
<td>50 years or more in community</td>
</tr>
<tr>
<td>Economic well-being</td>
<td>Somewhat/very difficult to meet expenses</td>
</tr>
<tr>
<td></td>
<td>Not very difficult to meet expenses</td>
</tr>
</tbody>
</table>

has a higher proportion of women in its elderly population, reflecting the heavy loss of life among German men in World War II. Germany also has the highest share of elderly widowed spouses.

The American elderly have the highest education levels across the five nations, with six in ten elderly people having completed high school (twelve or more years of education). In both the United States and Canada 24 percent of elderly people have education beyond high school, but Canada has fewer high school graduates than the United States. Japan has the lowest level of educational attainment; 87 percent of its elderly population have the equivalent of less than a high school education, and only 9 percent have a post–high school education.

Despite the common perception that American elderly are the most likely to live independently, the survey reveals that living alone is not an American phenomenon. Although nearly a third (31 percent) of elderly Americans live alone, the rates are higher in the other survey countries—34 percent in the United Kingdom, 40 percent in Canada, and 46 percent in Germany. The striking exception is Japan, where only 10 percent of elderly people live alone and nearly a third (32 percent) live with their children or others. In all other countries, between 10 and 15 percent of elderly people live with children or others. The smaller proportion of elderly people in Germany living with a spouse (39 percent) again reflects the large number of elderly people who are widowed.

The elderly in all five nations are a relatively stable group in terms of length of residence in the community. In both Germany and Japan seven in ten elderly people report living in the same community for the past thirty years. Approximately half of the elderly in the other countries report similar long-term ties to the community. Over 20 percent of the elderly in all countries and more than a third of those in Germany and Japan report living in the same community for fifty years or more. The majority of elderly people in the United States have lived in the same community for thirty years or more, and 23 percent have been in the same community for fifty years or more. Contrary to popular myth, Americans are not significantly more mobile than their elderly counterparts in other countries and are, in fact, somewhat more settled than the Canadian and British elderly (Exhibit 1).

The elderly in the United States and the United Kingdom are most likely to report experiencing some or a lot of difficulty in meeting regular expenses, with 31 percent reporting difficulty in the United States and 38 percent reporting difficulty in the United Kingdom. A quarter of Canadians and 21 percent of Germans report difficulty. Japan has the lowest level (15 percent) reporting difficulty in meeting expenses. This is perhaps explained by the low percentage of Japanese elders who live
alone compared with elders in the other countries, resulting in greater economic support from families for the elderly in Japan.

Life Satisfaction And Experiences

Satisfaction with life and engagement in productive and rewarding use of one's time are measures of social well-being. Residents of the United States and Canada express the highest levels of satisfaction with life; 61 percent of American elderly and 58 percent of Canadian elderly report that they are very satisfied with life. Great Britain and Germany follow, with 49 percent and 40 percent of elderly very satisfied. The Japanese are the least satisfied, with just over a quarter (28 percent) reporting they are very satisfied.

A significant proportion of the elderly population—14 to 24 percent of elderly people—in each of the countries report feeling lonely too often (Exhibit 2). This finding is not surprising, given the loss of spouses, family, and friends in later life and the large numbers of elderly people who live alone in each country. German elderly are the most likely to be widowed and live alone and also the most likely to express being lonely too often. Although most elderly have substantial social interaction, about one in four elderly people in the United States and the United Kingdom and one in three elderly people in Germany and Canada report spending one or more days in the past week entirely alone.

There is notable diversity across the five countries in the way elderly people use their time and the extent of their social interaction. Most have weekly contact with family members and spend time visiting or

<table>
<thead>
<tr>
<th>Exhibit 2</th>
<th>Social Interaction Among The Elderly In Five Nations, 1991</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>United States</td>
</tr>
<tr>
<td>Social contact</td>
<td></td>
</tr>
<tr>
<td>Feeling lonely too often</td>
<td>17%</td>
</tr>
<tr>
<td>Entirely alone one or more days in past week</td>
<td>28</td>
</tr>
<tr>
<td>Talking in person with nonresident family member in past week</td>
<td>79</td>
</tr>
<tr>
<td>Visiting or talking to friends 3 or more hours per day</td>
<td>22</td>
</tr>
<tr>
<td>Social activities</td>
<td></td>
</tr>
<tr>
<td>Do not leave the house during the day</td>
<td>14</td>
</tr>
<tr>
<td>Watching television 5 or more hours per day</td>
<td>21</td>
</tr>
<tr>
<td>Exercising or walking 3 or more hours per day</td>
<td>22</td>
</tr>
<tr>
<td>Working in a paid job</td>
<td>11</td>
</tr>
<tr>
<td>Doing volunteer or community service</td>
<td>31</td>
</tr>
</tbody>
</table>

Source: Commonwealth Fund Commission on Elderly People Living Alone, The Elderly in Five Nations (Survey conducted by Louis Harris and Associates, 1991).
talking with friends. Over 70 percent of the elderly in all countries but Japan report having contact with a family member outside their household in the past week. That only half of Japanese elderly report such external family contacts reflects the predominance of family members living in the same household as the Japanese elder. Talking or visiting with friends provides most elderly people with social contact during the day, but the level of social interaction is highest among the American and Canadian elderly (Exhibit 2).

More than one in ten elderly people in the five nations report that they do not leave their homes during the day. Nearly two in five (37 percent) of German elderly people say they do not leave home during the day—a rate about two times that of the other countries. American and Canadian elderly are more likely to leave their homes, but in both countries 14 percent of the elderly report no outside activities.

At home, television appears to be a major source of entertainment and activity for the elderly, regardless of country of residence. At least 20 percent of the elderly in each nation report spending five or more hours per day watching television. The elderly in the United Kingdom are the most avid television watchers.

Physical activity during the day varies substantially across the countries. British elderly are the most likely to be engaged in physical activity, with 27 percent reporting exercising or walking for at least three hours a day. The United States has the next-highest level of physical activity, with 22 percent engaging in at least three hours per day. Despite their greater longevity, the Japanese report the smallest percentage of vigorous exercisers (8 percent).

Many of the elderly are away from home during the day because they work or perform community service and volunteer activities, but the extent of participation in these external activities is strikingly different across the five nations. Over a quarter (28 percent) of Japanese elderly are employed, compared with 11 percent of elderly Americans and less than 10 percent of the elderly in Canada, Great Britain, and Germany. Elderly in the United States and Canada are most likely to engage in volunteer activities and community service (Exhibit 2).

Use Of Health Care Services

Throughout the survey nations, the elderly population shares in common a belief that health services can make a difference, and most are relatively pleased with the health care they receive. Canadians are the most pleased with their care and the Japanese the least (Exhibit 3).

With regard to general health status and use of medical care services,
elderly people in the United States and Canada bear the greatest similarity. They are somewhat healthier and use fewer physician services but are more often hospitalized than are elderly people in the other three countries surveyed. Less than a third of American elderly (31 percent) and 29 percent of Canadian elderly have fair or poor health status (Exhibit 4). The Germans report the poorest health status, with over half in fair or poor health. Surprisingly, despite longer life expectancy, 44 percent of the Japanese elderly report their health to be fair or poor.

Use of health services varies widely across the survey countries. Use of physician services by the Japanese elderly far exceeds that of all other survey countries even when health status is taken into account. Elderly
people in the United States are the least likely to see or talk to a
physician or incur multiple physician visits. Forty percent of elderly in
the United States report no physician contacts over the past six months,
in contrast to only 1 percent of Japanese elderly and 14 percent of
German elderly. Although some of the difference between the U.S.
experience and that of Japan and Germany can be attributed to the
poorer health status of the latter countries, the differences are too great
to be explained by health status differences alone. Undoubtedly, differ-
ences in attitude and access to health care as well as practices requiring
physician contacts to obtain prescription drugs in Japan or refill prescrip-
tions in Germany play a significant role in the different levels.

Although they experience fewer contacts, Americans spend the most
time with their physicians, with an average visit lasting thirty minutes.
The shortest visit time occurs for the Japanese elderly at an average of
twelve minutes, almost a third lower than the United States average
visit length. The Japanese have the most frequent contacts with physi-
cians but the shortest exposure.

Hospitals appear to play a very different role in the delivery of care
across the five nations. Residents of the United States and Canada are
hospitalized more frequently but generally have shorter hospital stays
than do their counterparts in the other three nations. The percentage of
elderly people hospitalized in the past year ranges from 18 percent in the
United States and Canada to 10 percent in Japan.

Lower hospitalization rates in Japan are notably offset by incredibly
long hospital stays, reflecting the Japanese use of hospitals as chronic
and long-term care facilities. The mean length-of-stay in Japan is forty-
three days—six times higher than in the United States. Next to Japan,
the United Kingdom has the lowest percentage of elderly people hospi-
talized (14 percent), but, unlike in Japan, average length-of-stay in the
United Kingdom is also comparatively low.

In general, utilization experience of elderly people is most comparable
in the United States, Canada, and the United Kingdom. The high levels
of physician use and long lengths-of-stay set Japanese elderly apart from
the elderly in the other four nations. German elderly are higher users of
health services than are other elderly but have use levels considerably
below those of Japan. The high utilization levels of the German elderly
are partially explained by their poorer health status.

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Health Care Attitudes

The fear of serious illness haunts most elderly people but is rivaled in
the United States by the fear of the cost of medical care (Exhibit 5). Half
to three-quarters of elderly people in the other nations rank fear of illness as the greatest threat to their well-being, compared with only 41 percent of American elderly. In striking contrast, over a quarter (27 percent) of Americans, compared with 5 percent or less of the elderly in the other nations, believe the cost of medical care is the most serious threat to well-being. In the United States, as in all countries, being ill is the greatest fear among the elderly. Yet a significant number of American elders fear the high cost of illness, unlike the elderly in other countries. Even with Medicare coverage, American elderly are not secure about their ability to finance their medical expenses.

Out-of-pocket expenses for medical care for elderly Americans reinforce this fear of impoverishment. Twenty percent of American elderly view out-of-pocket medical expenses as a major problem, compared with 6 percent of Canadian and German elderly and 2 percent of British elderly (Exhibit 6). Only Japanese elderly expressed a level of concern with out-of-pocket spending equal in magnitude to the Americans. Prescription drug spending is a major contributor to out-of-pocket spending in Japan.

Attitudes toward the health system are only partially reflected in the elderly’s assessment of the adequacy of their country’s system for paying for medical care (Exhibit 7). Elderly Americans express the highest level of dissatisfaction, with 29 percent agreeing that the current system is not
adequate. The most satisfied elderly with their system are the Canadians. Only 8 percent of Canadians find their system to be inadequate, a striking contrast to the views of elderly Americans, one in three of whom describe their system as inadequate.

Source: Commonwealth Fund Commission on Elderly People Living Alone, The Elderly in Five Nations (Survey conducted by Louis Harris and Associates, 1991).
Policy Implications

This five-nation survey shows a remarkable commonality in experience and attitude among the elderly people of diverse nations. Despite cultural and social differences, the elderly of all five nations share a relatively positive attitude toward life, have close bonds to family, count on family and friends for companionship and support, and engage in multiple activities in their homes and communities. Most have strong ties to their communities, as reflected in the substantial proportion of the population living much of their lives in the same community.

Among the elderly of the five nations, Americans and Canadians bear the greatest similarity. The notable exception is in attitude toward health care services. Americans are generally pleased with the quality of care and their use of health care services but hold the cost of care as a major concern. Among the survey nations, American elderly people were most likely to rate the fear of the financial consequences of serious illness as the most serious threat to well-being. This is a notable difference between American and Canadian elderly.

The findings from this study open many areas for further exploration in the development of policies to improve protection and increase independence among elderly people. The importance of family and social interaction is underscored by the survey findings and should be reflected in the development of social policy across the five nations. The large proportion of elderly people who live alone in all but Japan underscores the need to develop social support services to help maintain independence with increased frailty. The value attached to medical services in all cultures also points to the need for medical care policies that promote choice and patient involvement in care decisions but assure adequate coverage for the cost of such care. For the United States, meeting the medical cost concerns of the elderly remains a major challenge in which, despite Medicare coverage, the United States lags behind the other nations in the survey.

NOTES

1. Louis Harris and Associates, The Elderly in Five Nations: United States, Canada, United Kingdom, West Germany, and Japan (Survey conducted for the Commonwealth Fund Commission on Elderly People Living Alone, New York, 1991).