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Review article

A public health approach to health and retirement: What do we know about their relationship?



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ABSTRACT

The exit from active life and the ingress into a life stage in which labour activities and relations do not exist, or could be of a different nature, is a feature of retirement.

Several studies have investigated the effects of changes in health upon retirement. Several others have investigated the effects of retirement on health. If retirement is responsible for affecting health, then the implementation of public health policies, aimed at improving older individual's health, should take this matter into account. Similarly, the implementation of political changes in retirement age such as those that we are witnessing in Portugal should be carefully planned.

The aim of this work is to describe and discuss the international and national studies conducted to improve the understanding of the relationship between health and retirement, especially between chronic diseases (and self-perceived health) and retirement, and also to highlight the importance of studying this subject from a public health point of view in Portugal.

Regarding the effects of health on retirement, self-perceived health seems to have a relevant effect on retirement, as well as chronic diseases, although there is less agreement in the latter case. Findings on the impact of retirement in health are not consensual and it is thought that the nature of the analysis (cross-sectional or longitudinal), the timing and the reason for retirement, the circumstances of an individual before and after retirement and the health measure under research could be primarily responsible for the lack of consistency among studies.

Concerning the Portuguese population, the few studies found about health and retirement are focused in different health status indicators, making it difficult to reach a general

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conclusion. Thus the need remains for the establishment of more methodologically valid research studies in Portugal, mainly epidemiologic studies involving the quantification of association and impact measures.

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Saúde e reforma: o que conhecemos da sua relação numa perspectiva de saúde pública?

RESUMO

Palavras-chave: Reforma Doenças Crónicas Saúde Percebida Saúde Pública Portugal A saída da vida ativa e a entrada numa fase da vida em as relações e atividades laborais não existem ou são de natureza diferente constituem uma característica da reforma.

Alguns estudos têm investigado os efeitos das alterações do estado de saúde na reforma. Outros têm investigado os efeitos da reforma no estado de saúde. Se a reforma for responsável por afetar o estado de saúde, então a implementação de políticas públicas saudáveis, para melhoria da saúde dos adultos idosos, deveriam tê-lo em consideração. Da mesma forma, a implementação de alterações na idade da reforma, tais como aquelas que têm vindo a verificar-se em Portugal, também o deverão ponderar.

Constituem objetivos deste trabalho descrever e discutir os estudos que têm sido desenvolvidos para melhoria do conhecimento da relação entre a saúde e a reforma, nomeadamente, entre as doenças crónicas (e saúde percebida) e a reforma, assim como sublinhar a importância da investigação deste tema em Portugal numa perspetiva de Saúde Pública.

No que concerne aos efeitos da saúde na reforma, a saúde percebida e as doenças crónicas parecem ter um importante papel para a reforma, apesar de haver menos concordância relativamente às últimas. Por outro lado, as conclusões sobre os efeitos da reforma na saúde não são consensuais, facto que tem sido atribuído às diferenças na natureza de análise (transversal ou longitudinal), do momento de reforma, dos motivos de reforma, e do indicador de estado de saúde sob investigação em diferentes estudos.

Relativamente à população Portuguesa, os poucos estudos preconizados focam diferentes indicadores de saúde, tornando difícil atingir uma conclusão comum. Permanece, na verdade, a necessidade de desenvolvimento de estudos sobre esta matéria em Portugal metodologicamente mais válidos, principalmente com a quantificação de medidas de associação e de impacte.

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Introduction

The demographic changes observed during the last decades and the projections for the future point to an unprecedented transition in the demographic structure in the history of humanity. Population ageing has been made possible by advances in medicine and health care in the last centuries, and this reality has important implications for which countries will have to adjust, particularly in which policies and legislation to be adopted. The extent of the challenge linked with population ageing has been greatly debatable and more positive outlooks have been proposed. ²⁻⁴

It is estimated that the proportion of people over 65 years of age will triple between 1950 and 2050 in Europe.⁵ According to Statistics Portugal, the number of ageist in Portugal (people over 65 years old) in 2050 will be 2.95 millions, one million more than in 2006 (1.82 millions).⁶ In this scenario,

the Portuguese population ageing process will be aggravated, as expressed by the ageing index that today is of 129.4 elders for every 100 children under 14 years⁷ and is expected to be 238 for every 100 children under 14 years by 2046.⁶

In the last century we have also witnessed an epidemiological transition, in which chronic diseases became the leading cause of death and disability worldwide, with a higher prevalence in old age. Its prevalence has increased globally across almost all regions and socio-economic backgrounds. In 2008 the morbidity, mortality and disability attributable to major chronic diseases accounted for 68% of all deaths and 43% of the global burden of disease, while by 2020 estimates point to 73% of all deaths and 60% of the global burden of disease. In Portugal, data from the National Health Survey 2005/2006, show a prevalence of these diseases in 49.9% of men and 58.5% of women. The mortality attributed to them in 2008 was approximately 45.4% in men and 43.4% in women. Globally, current evidence has shown that the major chronic diseases

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