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Nota di contenuto	Front matter -- Contents -- Preface -- Introduction -- 1. The Transition to Personal Accounts and Increasing Retirement Wealth: Macro- and Microevidence -- 2. For Better or for Worse: Default Effects and 401(k) Savings Behavior -- 3. Aging and Housing Equity: Another Look -- 4. Intergenerational Transfers and Savings Behavior -- 5. Wealth Portfolios in the United Kingdom and the United States -- 6. Mortality, Income, and Income Inequality over Time in Britain and the United States -- 7. Does Money Protect Health Status? Evidence from South African Pensions -- 8. Socioeconomic Status, Nutrition, and Health among the Elderly -- 9. Changes in the Age Distribution of Mortality over the Twentieth Century -- 10. Area Differences in Utilization of Medical Care and Mortality among U.S. Elderly -- 11. Healthy, Wealthy, and Wise? Tests for Direct Causal Paths between Health and Socioeconomic Status -- Contributors -- Author Index -- Subject Index

This book investigates several important issues in the economics of aging, including the accumulation of wealth and the relationship between health and financial prosperity. Examining the changes in savings behavior and investment priorities in the United States over the past few decades, contributors to the volume point to a dramatic shift from employer-managed, defined benefit pensions to employee-controlled retirement savings plans. Further, the legislative reforms of the 1980's and the booming stock market of the 1990's did their share to influence individual wealth accumulation patterns of Americans. These studies also explore the relationship between health status and economic status. Considering issues like pension income and health, mortality, and medical care, contributors present evidence from the United States, Britain, South Africa, and Russia. The volume culminates with wide-ranging discussions on a number of key topics in the field including the innovations that have contributed to a decline in mortality rates; the various medical advances that have benefited populations over time; and the determinants of expenditures on health. The findings with regard to cross-sectional differences in health outcomes and health care utilization also pose troubling questions for policymakers seeking to democratize health care across regions and races.

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