

An overview of the ELSA 'End of Life' data

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Preface

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Executive summary

The ELSA 'End of Life' (EoL) interviews collect information on the circumstances of deceased ELSA respondents.

A proxy respondent – a relative or close friend – is interviewed about the deceased individual's health in the last two years of life, expenses associated with their death, and their assets and the allocation of these after their death.

EoL interviews are available for a third of the core ELSA respondents who had died by the end of 2012.

EoL interviews were conducted alongside waves 2, 3, 4 and 6 of ELSA. Altogether there are 977 interviews in respect of core ELSA respondents.

Data quality

The individuals for whom EoL data are available are broadly representative of the full set of ELSA respondents who had died by the end of 2012.

There are some differences between the characteristics of those who are in the EoL data and those who are not. Couples are more likely than singles to be represented in the EoL data (as the surviving spouse is an easy-to-locate proxy respondent). Those who are in poor health, those who managed very well financially, and those who were owner-occupiers are also over-represented. However, all of these differences between the samples are small.

Proxy respondents can reasonably be expected to have good knowledge of the deceased's circumstances.

Over 90% of proxy respondents were either a surviving partner or a child of the deceased and/or were an executor or beneficiary of the deceased's will.

The limited data validation that is possible suggests that we can have some confidence in the responses given by the proxy respondents.

There is considerable overlap between the ownership of assets (private pensions, life insurance and primary housing wealth) reported by the proxy respondents in the EoL data and reported by the deceased individuals themselves in their last ELSA interview. There is also considerable correlation in reported house values between the EoL and ELSA data.

Findings: circumstances around death

46% of proxy respondents reported that the individual's death had been unexpected.

Nearly half of individuals had been ill for a year or more before they died. However, 12% either were not ill or had been ill for less than 24 hours when they died, while a further 10% had been ill for more than a day but less than a month.

It is most common for individuals to die in hospital (or en route to hospital).

56% of individuals died in hospital, 23% died at home, 7% in a hospice and 13% in a residential home.

Excluding the occasion of their death, 56% of individuals were reported to have stayed overnight in hospital in the last two years of their life.

Taking all spells in hospital together (including the occasion of death if applicable), 49% had stayed for less than a week in total, while 19% had stayed for more than a month in total.

Findings: health in the last years of life

Over 80% of individuals required help with one or more activities of daily living or instrumental activities of daily living in the last three months of life.

The activity most commonly cited as requiring help was shopping for groceries (by 65% of individuals), followed by bathing (59%) and preparing hot meals (55%).

The amount of time people spend feeling content or at peace declines towards the end of life.

Nearly half (49%) of individuals were thought by the proxy respondent to have 'often' been content or at peace in the last year of life, but that declines to 37% when asked about the last three months of life. Those who had been ill for longer periods of time before death were reported as having been less frequently content or at peace. Among those who had been ill for a year or more, only 28% were reported to have been 'often' content or at peace in the last three months before death, compared with 65% of those who died having been ill for less than 24 hours.

Findings: expenses around death

6% of individuals faced some out-of-pocket costs for medical treatment outside the NHS in the last year of life.

13% of individuals received medical treatment outside the NHS. Among those individuals, 19% were reported to have private insurance that covered all of the cost, while 33% were reported to have no financial cost involved.

The coverage of funeral insurance has declined over time, while out-of-pocket spending on funeral costs has increased markedly.

31% of those who died in 2002–03 had some insurance for funeral costs; that had fallen to 22% among those who died in 2010–12. The median out-of-pocket cost for funeral expenses was £1,700 among those who died in 2002–03, but £3,500 among those who died in 2010–12 (all figures in nominal terms).

Findings: assets and the allocation of the estate

Virtually all individuals had some assets when they died.

58% of individuals were owner-occupiers and 45% had private pensions. Few individuals had other property wealth or business assets (2% in both cases). The majority (88%) of individuals had some other non-pension, non-property, non-business assets.

Nearly half (45%) of individuals had at least one private pension when they died.

Among those with a surviving spouse or partner, 79% had someone continue to receive an income stream from the pension and 10% had someone receive a lump sum. In contrast, where there was no surviving partner, the pension payments ceased on death in at least 73% of cases.

A quarter of individuals are reported to have had life insurance.

Where the deceased had a surviving partner, they were virtually always the beneficiary. Where there was no surviving partner, in most cases the beneficiary was a child (or children). The median total payout (among those for whom the value was known) was £2,000.

Three-quarters of individuals with a surviving spouse were owner-occupiers. 86% of these individuals left all their housing wealth to their partner.

The median house value among owner-occupiers who gave all their housing wealth to their surviving partner was £182,000 and the mean value was £206,000.

Housing wealth was bequeathed outside of a surviving spouse by 27% of individuals (46% of owner-occupiers).

Children are the next most common beneficiaries of housing wealth after partners – children inherited housing wealth from 20% of the deceased individuals. The median total amount of housing wealth bequeathed when a spouse did not inherit everything was £135,000 and the mean value was £151,000.

Most individuals who are survived by their partner leave all their other assets to their partner.

Among individuals survived by a partner, 82% left all their assets to their partner; 15% gave some or all of their assets to children, while 6% gave some or all of their assets to their grandchildren.

Children are the most common beneficiaries of other assets when there is no surviving partner.

Among individuals with financial assets who were not survived by a partner, 77% left an inheritance to children, 16% to grandchildren and 11% to one or more siblings (81%, 74% and 57% had children, grandchildren and living siblings respectively).

A bequest of other assets was made outside of a surviving partner by 58% of those with such assets (i.e. by 51% of all individuals).

An inheritance was received by one or more children from 40% of individuals, and by one or more grandchildren from 10% of individuals. The median value of the total bequest made to individuals other than a surviving partner was £12,000 and the mean was £51,000.

Bequests are normally made to multiple individuals, and so the size of each inheritance received is only a fraction of the size of the estate.

Among those with other assets who were not survived by a partner, 32% left these assets to one individual, 24% left them to two individuals, 16% left them to three individuals, and 26% left them to four or more individuals. The median value of inherited other assets at the individual recipient level (from those who died without a surviving spouse) was £3,000 and the mean was £17,000.

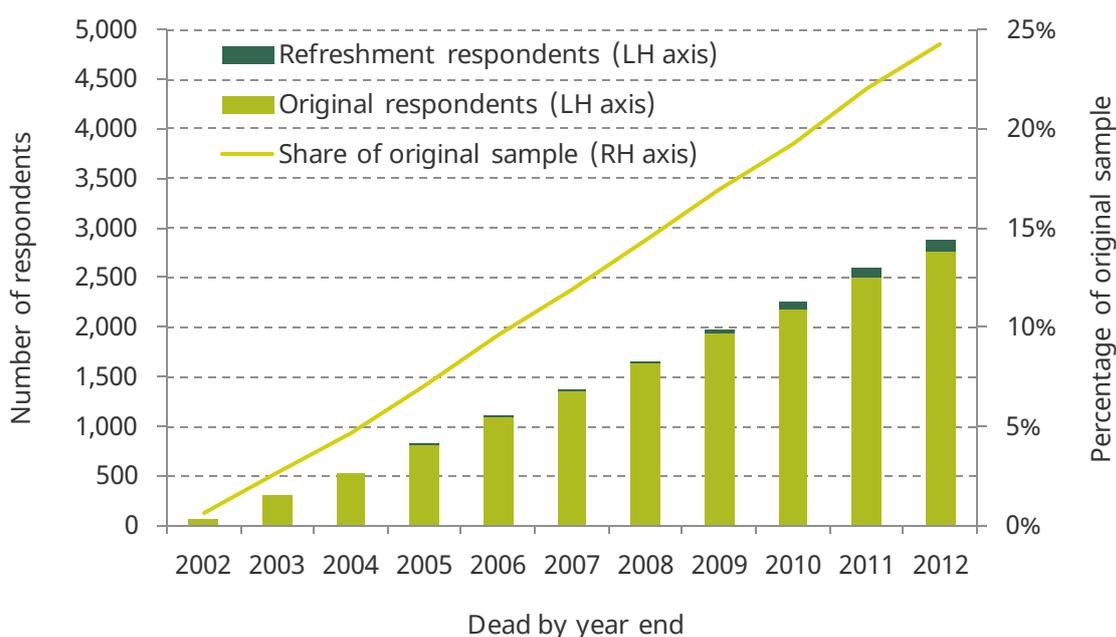
1. Introduction

The ageing of the population is one of the biggest changes facing society today. People are living longer, remaining healthier at older ages, and working and engaging in society for longer. This is an achievement that should be celebrated, both in its own right and for the opportunities it presents, with older generations able to provide assistance to younger generations and pass down their accumulated experience and wisdom. However, such changes are, of course, not without challenges. The needs of an older population are different, and this has profound implications for the planning of economic, health and social policy by government, and for the decisions made by the population as a whole. There are also marked inequalities in the experiences of those with different circumstances, which presents an additional set of challenges when adapting policy to address issues such as income security, social isolation, and health and social care provision.

For the last decade, the English Longitudinal Study of Ageing (ELSA) has been an invaluable source of information on the economic, social and health circumstances of the older population. ELSA is a representative survey of the private household population of England aged 50 and over. It began in 2002 and has interviewed the same households every two years since. The original sample of over 11,000 individuals has been followed for 14 years so far, and individuals have also been added to refresh the younger ages to ensure that the study remains representative of people aged 50 and older. ELSA collects data on household composition, employment and pensions, housing, income and wealth, self-reported doctor-diagnosed diseases and symptoms, cognitive performance and walking speed, health behaviours, care giving and receipt, social contacts and activities, quality of life and expectations. ELSA data have been instrumental in furthering understanding of issues such as: labour market participation at older ages; the accumulation and spend-down of wealth in retirement; the effect of state pension policy reforms; the genetic, biological and social pathways that lead to frailty; the lifestyles of older cohorts; forecasting trends in disability and life expectancy; how well-being changes as people age; and the importance of loneliness and social isolation in determining health and well-being.

Many respondents have died since ELSA started in 2002. Figure 1.1 illustrates how the proportion of the original ELSA sample known to have died has evolved over time. A nice feature of ELSA is that respondents are asked for permission to link their records to official mortality data (the National Health Service Central Register), which provide date of death even if an individual had stopped responding to the ELSA survey some time previously. As of the end of 2012 (the last time linked mortality data were made available), 24% of the original ELSA sample had died (2,763 deaths). A further 123 deaths have also been recorded amongst individuals who joined the ELSA sample after 2002 as 'refreshment' individuals.

While an individual can clearly no longer respond to ELSA once they have died, a follow-up interview is attempted with a proxy respondent – a relative or friend of the deceased respondent – to elicit information on the circumstances of the deceased individual. In particular, these 'End of Life' (EoL) interviews collect data on the individual's health in the two years preceding their death, expenses around and at the end of life, and the size and allocation of the individual's assets after their death. These EoL interviews are a feature

Figure 1.1. Deaths of ELSA sample members over time

Note: Sample is core ELSA respondents; original sample is those who responded in wave 1. Around 95% of respondents gave permission for linkage to mortality records. For individuals who did not give permission, but who are known to have died either through notification to ELSA or through the interview process, date of death is either obtained from an End of Life interview or approximated based on when the ELSA survey team learnt that the respondent had died.

that is unique among UK household surveys, but in common with some other international ageing studies such as the Health and Retirement Study in the US.

EoL interviews were conducted alongside the second, third, fourth and sixth waves of ELSA. Over the four waves, EoL interviews were completed for a total of 988 individuals. Of these, 977 were in respect of core ELSA respondents who had died before the end of 2012 – representing a third of the sample of ELSA respondents known to have died by that time.

In this report, we provide an introduction to the ELSA EoL data. Chapter 2 is devoted to discussing the quality of the data. The two important issues considered are: (i) the extent to which the subsample of deceased ELSA respondents for whom EoL data are available are similar, in terms of their observed characteristics, to the full sample of deceased respondents; and (ii) how confident we may be in the responses given to the EoL questionnaire by the proxy respondent. In other words, are the EoL data ‘any good’ in terms of how representative they are, and how accurate are they? Chapter 3 provides more detail on the contents of the EoL questionnaire and summarises some of the data that are collected. This covers four main areas: circumstances around death, health in the last years of life, end-of-life expenses, and assets and their distribution after death. Chapter 4 draws some conclusions.

2. Data quality

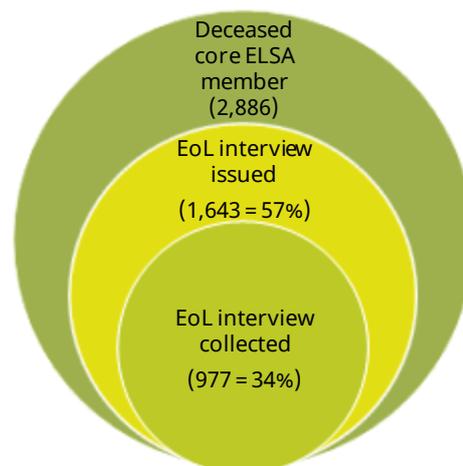
With any new data source, it is always important to consider the likely quality of the data. This is particularly true in the case of the ELSA EoL data, given the inherent difficulties in locating a family member or close friend of the deceased who is willing and able to participate, and the fact that the entire interview is essentially a proxy interview, with questions being asked about the circumstances of the deceased individual rather than the respondent themselves. In this chapter, we therefore examine the representativeness of the EoL data that have been collected and consider the likely accuracy of the responses given by the proxy respondents.

2.1 Representativeness of the sample

EoL interviews are available for only one-third of the ELSA respondents who were dead by the end of 2012. In addition to the problems associated with small sample sizes, this provokes the concern that the EoL data may not be representative of the entire group of deceased ELSA respondents. The goal of this section is therefore to assess whether individuals with EoL interviews differ, in terms of their observed characteristics, from the rest of the sample. The absence of significant discrepancies would reassure about the representativeness of the EoL interviews.¹

First, it is important to note that not all the absences of an EoL interview are indicative of EoL interview non-response. Of the 2,886 ELSA respondents now known to have died by the end of 2012, only 1,643 (57%) were attempted to be followed up via a proxy EoL interview.² Interviews were not attempted with those for whom a suitable proxy respondent could not be identified or (for ethical reasons) with those who had either died too recently (within six months) or too long ago (more than two waves – i.e. roughly four years – ago). Figure 2.1 summarises the breakdown of deceased ELSA members by EoL

Figure 2.1. Breakdown of deceased ELSA core members by EoL interview availability



¹ We assess here whether the EoL data are representative of the full sample of deaths from ELSA. To the extent that ELSA is a representative survey of the household population aged 50 and over between 2002 and 2012, this would then suggest that the EoL data are representative of deaths among that group over that time period.

² Further details can be found in the NatCen 'User guide to the End of Life interview datasets'.

interview availability. Since the data are not readily available, we do not distinguish in our analysis between those who did not have an EoL interview because an interview was not attempted and those who did not have an EoL interview because the approached proxy respondent did not respond.

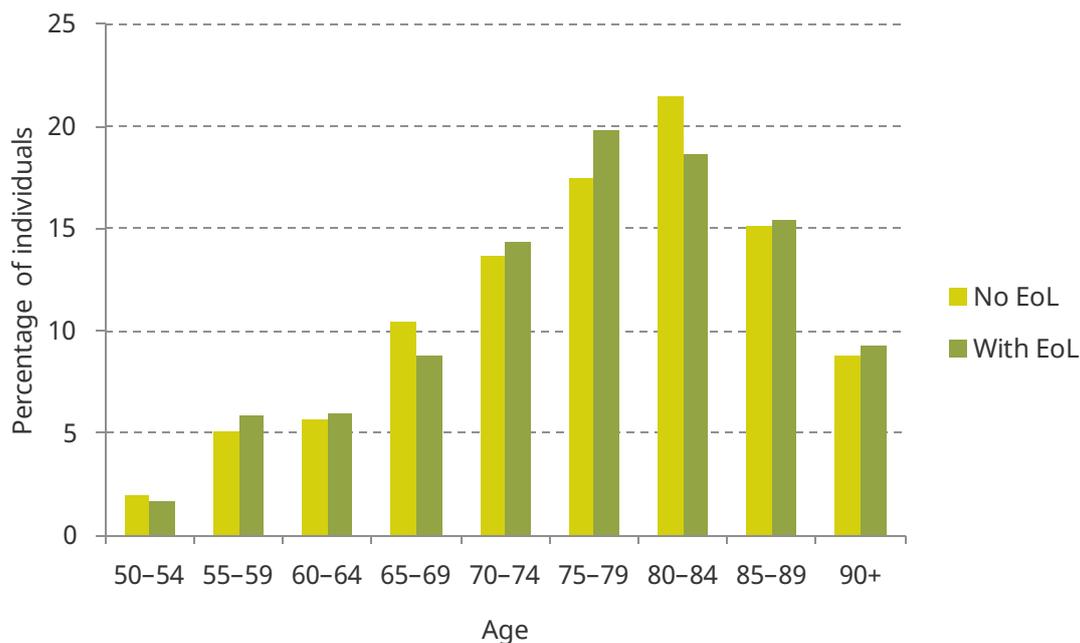
Univariate analysis

The main difference that might be expected between individuals for whom an EoL interview is available and those for whom it is not is in terms of their household composition. It is much easier to identify and locate a proxy respondent for ELSA members who have a surviving spouse, many of whom would be members of ELSA in their own right, than for those without a surviving spouse. This proves to be the case: while 28% of deceased single men and 30% of deceased single women have an EoL interview, 40% and 35% of deceased men and women (respectively) who were in couples in their last ELSA interview have an EoL interview.

It is less obvious that other characteristics would be expected to make an individual more or less likely to be successfully followed up with an EoL interview. Figure 2.2 shows the distribution of age at death for the subsample who have EoL interviews and the subsample who do not. There is relatively little difference between the two groups – the median age at death is 78 among both those with an EoL interview and those without.

Table 2.1 describes and compares other demographic characteristics (reported in the last ELSA interview that the individual completed) of the subsample who have EoL interviews and the subsample who do not. When characteristics are each considered in isolation, there are a number of significant differences between the two groups. Among those with an EoL interview, a higher proportion are female, a smaller proportion are single, a higher proportion are in joint-finance couples, a higher proportion are owner-occupiers, a smaller proportion are current smokers, a higher proportion self-reported being in poor

Figure 2.2. Distribution of age at death: those with EoL interview and those without



Note: Sample is 977 individuals with EoL data and 1,909 individuals without.

Table 2.1. Demographic characteristics: those with EoL interview and those without

Percentage of the sample:	No EoL	With EoL
Female	49.9%	45.8%**
<i>Household type:</i>		
Single	54.5%	44.3%***
Couple – joint finances	37.3%	46.5%***
Couple – separate finances	8.1%	9.2%
High education	35.0%	36.0%
Owner-occupier	63.1%	71.4%***
<i>Smoker:</i>		
Never smoked	26.1%	26.6%
Used to smoke	52.6%	55.0%
Current smoker	19.0%	14.7%***
<i>Self-reported health:</i>		
Excellent or very good	17.6%	15.5%
Good	27.0%	23.7%*
Fair	28.7%	27.0%
Poor	26.8%	33.8%***
<i>Self-reported financial situation:</i>		
Manage very well	25.6%	31.9%***
Manage quite well	33.5%	31.2%
Manage alright or less than alright	38.1%	34.1%**
Sample size	1,909	977

Note: Characteristics are measured in the last ELSA interview that the individual completed. ***, ** and * indicate that the difference between those with an EoL interview and those without is statistically different from zero at the 1%, 5% and 10% significance level respectively.

health, and a higher proportion self-reported managing very well financially or managing alright or less than alright, than among those without an EoL interview.

Table 2.2 describes and compares the income and wealth of the two subsamples. Since income and wealth are measured at the household level, and the proportion of the sample who were in a couple is significantly different between the two subsamples, the figures are shown separately for couples and singles (again, couple status and income/wealth are measured in the last ELSA interview the individual completed). Among single deceased individuals, there are no statistically significant differences between median income or median wealth among those with an EoL interview and those without. Among couples, however, median wealth (particularly housing wealth) is significantly higher among those with an EoL interview than among those without, as are total income and median private pension income.

Table 2.2. Household income and wealth: those with EoL interview and those without

Median:	All		Couples		Singles	
	No EoL	With EoL	No EoL	With EoL	No EoL	With EoL
<i>Income (£ per week)</i>						
Total income	219.7	241.3***	291.7	316.7**	166.9	165.8
Private pension income	18.5	29.4***	43.2	63.3***	5.5	6.9
State pension income	110.0	118.2**	145.8	142.0	96.0	94.0
Other income	39.0	47.1*	61.5	66.9	21.1	21.2
<i>Wealth (£)</i>						
Total wealth	100,000	125,837***	150,000	180,000**	52,100	56,006
Net non-housing wealth	7,000	10,901***	14,000	18,467*	5,000	5,500
Net primary housing wealth	80,000	100,000***	115,500	149,000***	17,500	35,000
Sample size	1,877	970	849	539	1,028	431

Note: ***, ** and * indicate that the difference between those with an EoL interview and those without is statistically different from zero at the 1%, 5% and 10% significance level respectively. Sample sizes are slightly smaller than in Table 2.1 due to some missing financial information in ELSA.

Multivariate analysis

The univariate analysis above illustrated how the characteristics of the subgroup for whom EoL data are available differed from the characteristics of the subgroup for whom EoL data are not available, primarily by considering each characteristic in isolation (the exception was Table 2.2, which also split by household type). However, it could be that one factor is driving many of the differences. To consider this, multivariate analysis is used to identify the association of each characteristic, *while holding all other characteristics constant*, with whether or not there is an EoL interview. (The dichotomous nature of whether or not individuals have an EoL interview means this is estimated using a probit model rather than ordinary least squares.) Table 2.3 shows the list of characteristics jointly considered and the estimated marginal effects. Household type is strongly significant: deceased respondents who were in a couple are more likely to be followed up with an EoL interview than single individuals (8 percentage points more likely, for individuals with 'average' other characteristics). However, once household status is controlled, few other characteristics are significantly different between those who are in the EoL data and those who are not. The three exceptions are: those in poor health, who are more likely than those with better health to be represented in the EoL data; those who self-report managing very well financially, who are more likely to be represented in the EoL data than those who report managing quite well or alright or less than alright; and those who are owner-occupiers, who are more likely to be represented in the EoL data than those who did not own their homes. This last is likely due to the fact that homeowners are less mobile, and therefore easier to follow in longitudinal surveys such as ELSA, than non-homeowners. The multivariate analysis was also conducted separately for couples and

Table 2.3. Multivariate analysis of the characteristics associated with having an EoL interview

Pr(has EoL data) on:	Marginal effect	Standard error	Mean
Female	-0.013	0.019	0.485
<i>Household type (ref = single):</i>			
Couple – separate finances	0.083**	0.037	0.085
Couple – joint finances	0.083***	0.023	0.404
<i>Age (ref = 50–59):</i>			
60–69	-0.044	0.043	0.158
70–79	0.005	0.045	0.323
80–89	-0.022	0.045	0.357
90+	0.023	0.053	0.100
High education	-0.011	0.020	0.353
Owner-occupier	0.051**	0.023	0.767
<i>Smoker (ref = never smoked):</i>			
No info	0.027	0.059	0.028
Used to smoke	-0.009	0.022	0.534
Current smoker	-0.049*	0.028	0.175
<i>Self-reported health (ref = good):</i>			
Excellent or very good	-0.008	0.027	0.169
Fair	0.026	0.024	0.281
Poor	0.089***	0.025	0.291
<i>Self-reported financial situation (ref: manage quite well):</i>			
No info	0.055	0.064	0.027
Manage very well	0.065***	0.023	0.283
Manage alright or less than alright	-0.006	0.021	0.362
Private pension income (£ p.w.)	0.000	0.000	73.3
State pension income (£ p.w.)	0.000	0.000	114.8
Other income (£ p.w.)	0.000	0.000	92.7
Net non-housing wealth (£0,000)	0.001	0.001	4.913
Net primary housing wealth (£0,000)	0.001	0.001	11.428

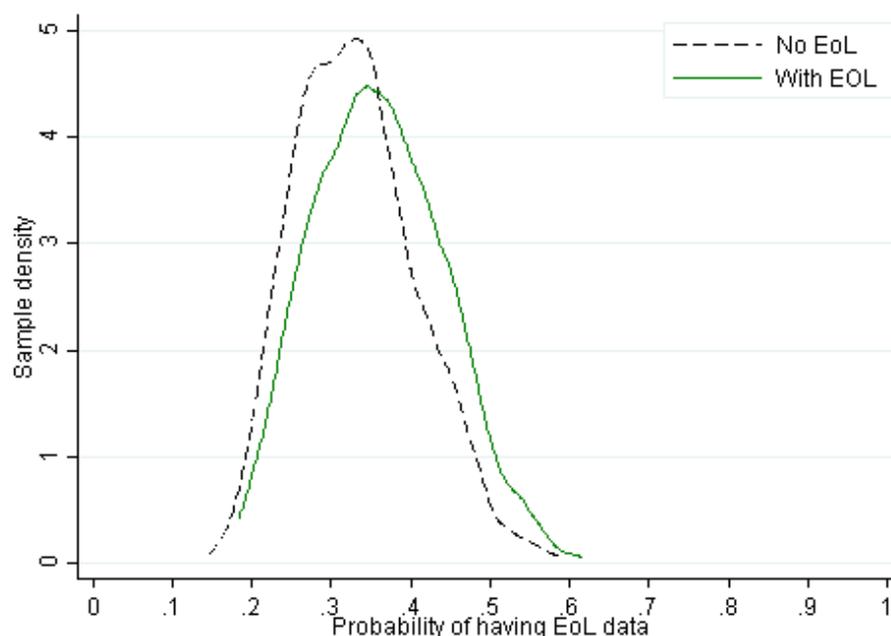
Note: N=2,847. Marginal effect \times 100 gives the percentage point increase in the probability of having EoL data that is associated with a one unit increase in a particular characteristic (compared with the relevant reference characteristic), for someone who has average all other characteristics. ***, ** and * indicate that the relationship between a characteristic and the probability of having EoL data is statistically different from zero at the 1%, 5% and 10% significance level respectively.

singles. This indicated that the over-representation of owner-occupiers is driven by singles not couples, while the over-representation of those in poor health is driven by couples not singles.³

These results indicate that those who have EoL data are not far away from being representative of the full sample of deceased respondents. There are some groups who are slightly over-represented – namely, couples, those in poor health, those who managed well financially and those who were owner-occupiers – but these differences are only small. Another way of illustrating this point is to use the estimation results presented in Table 2.3 to predict for every deceased ELSA respondent what the probability is, given their characteristics, that they are in the EoL data. The distributions of these probabilities for those who do have EoL data, and those who do not, are illustrated in Figure 2.3. The distributions are highly overlapping, which again illustrates that those in the EoL data are very similar in terms of their observed characteristics to those not in the EoL data. As would be expected, the distribution of predicted probabilities lies slightly to the right for those who are in the EoL data – i.e. on average, they look a little more like those in the EoL data than those who are not in the EoL data.

Given that the EoL respondents are not completely representative of the full sample of deceased ELSA respondents, it is worth people who are using these data for analysis considering whether to *weight* the data in order to compensate for the differences in observable characteristics. In our analysis of the data presented in Chapter 3, we use inverse probability weighting, weighting each individual in the EoL data by the inverse of the predicted probability that they appear in the data (calculated as described above). It is worth noting, however, that while this makes results estimated from the EoL data more likely to be representative of the full sample of deceased ELSA respondents, this does not compensate for any non-representativeness between ELSA decedents and the population of older individuals who died over this period, which we do not have the data to examine.

Figure 2.3. Distribution of estimated probability of having EoL data, by whether or not EoL data are available



³ The regression results are not presented here, but are available on request.

2.2 The proxy respondents

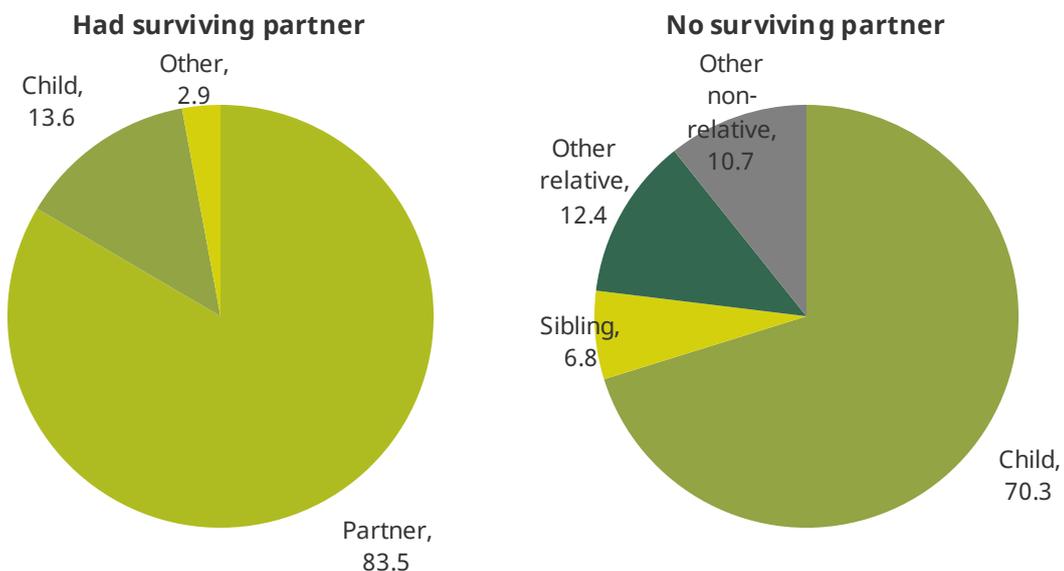
The quality of the data collected by the EoL interviews hinges on the ability of the proxy respondent to provide information on the deceased individual's health, social circumstances and financial situation in their last years of life. The relationship of the proxy respondent to the deceased ELSA member is shown in Figure 2.4. Where the deceased had a surviving spouse or partner, the vast majority of EoL interviews (84%) were conducted with the surviving partner. The remaining cases were predominantly interviews with a child of the deceased. Among single deceased respondents, there is a greater variety of relationships with the proxy respondents. Over two-thirds (70%) are with a child of the deceased and 7% are with a sibling, but a significant minority, close to one-in-four, are interviews either with someone from the more extended family or with a non-relative.

Another indicator of how well the proxy respondent may be able to answer the EoL questions, particularly those pertaining to the deceased's assets, is whether the respondent is an executor of the deceased's will. Among those asked, 49% reported being an executor (71% reported that the individual had a will). Among those who reported not being an executor, two-thirds reported that they were, however, a beneficiary.

Taken together, over 90% of proxy respondents were either a partner or a child of the deceased and/or were an executor or beneficiary of the deceased's will. This suggests that, in general, the proxy respondents could be considered well placed to answer the EoL interview.

Another metric of how able the proxy respondents feel able to answer the EoL interview questions is the number of times they respond that they 'Don't know' the answer to a question. In Chapter 3, where we summarise some of the data collected, these responses are separated out. For most questions, the vast majority of proxy respondents do feel able to give an answer. There are, however, some questions that respondents find harder to answer, such as some of the more detailed financial questions. For a few of these questions, non-response can reach nearly 30%.

Figure 2.4. Relationship of the proxy respondents



2.3 Data validation

Of course, just because proxy respondents give an answer to a question does not necessarily mean the answer is correct. The EoL interviews attempt to collect data on the deceased ELSA respondents that are not available from other sources, and so by definition it is difficult to validate the answers given. However, for some of the information elicited, it is possible to compare the EoL data with data on the same individuals from other sources. In particular, data on the cause of death reported by the proxy respondent can be compared with those provided by linked Office for National Statistics (ONS) mortality data, while data on the estate of the deceased individual can be compared with the information on wealth and assets provided by the individual themselves last time they were interviewed in ELSA.

Cause of death

Table 2.4 compares the main cause of death reported by the EoL respondent with the main cause of death recorded in the administrative data provided by the ONS. The matching when the cause of death is cancer is very high: among EoL respondents who reported that the main cause of death was cancer, 93% of the deaths were officially recorded with cancer as the main cause. The matching is less strong for cardiovascular diseases, respiratory disease and other causes of death. However, for older individuals with co-morbidities, it could be that even well-informed individuals may report different causes of death from those officially recorded.

Table 2.4. Official cause of death, by EoL-reported cause of death

	Sample	Share who, according to official mortality data, died from:			
		Cancer (35%)	Cardiovascular disease (34%)	Respiratory disease (14%)	Other (16%)
Reported by proxy respondent:					
Cancer	33%	93%	4%	1%	2%
Heart attack, stroke, other cardiovascular disease	29%	5%	79%	8%	9%
Respiratory disease	13%	7%	19%	60%	15%
Other	24%	9%	30%	16%	45%
No response	2%				

Note: Sample is 899 EoL interviews where the deceased gave permission for ELSA to access their official mortality records.

Estate data

The EoL interview asks the proxy respondent whether the deceased held certain types of assets at the time of their death and the value of these. The prevalence and value of these assets can be compared with what was reported by the respondent themselves in their last productive ELSA interview. It is worth noting that, even in the absence of any measurement error, these data would not be expected to match perfectly. Individuals may have acquired or disposed of assets between their last ELSA interview and their death, and

assets that have been held on to may have changed in value (for example, movements in house prices will have changed primary housing wealth). Furthermore, there is likely to be measurement error in both the EoL data and the ELSA data with which we are comparing. It is an open question whether a proxy respondent has a better idea of the value of an estate (potentially after it has been distributed among inheritors) than a (potentially aged) ELSA respondent has about the value of their assets. However, in any case, one would expect a high degree of correlation between the EoL data and the ELSA data.

The prevalence of assets such as non-owner-occupied property and businesses is so low that a comparison between the EoL data and the ELSA data is not particularly informative. However, comparisons can be made for private pensions, life insurance and owner-occupied housing. This is done in Table 2.5. There is a high degree of correlation in private pension membership: 38% of individuals were reported to have a private pension in both the EoL data and the ELSA data, and 36% reported no private pension in both sets of data. Similarly, for life insurance, 55% of individuals had no life insurance according to both ELSA and EoL data, and 16% of individuals did have life insurance according to both sets of data. In both cases, the proportion of individuals who have the asset according to the ELSA data but not the EoL data is greater than the proportion who do not have the asset according to the ELSA data but do in the EoL data – suggesting that there is a greater tendency for wealth to be either divested or forgotten about by the proxy respondent, rather than acquired or wrongly recalled by the proxy respondent.

For housing ownership, 62% of deceased respondents owned a house in both the EoL and ELSA data, while 29% did not own a house in either. Of the remaining 10%, the majority were those who were owner-occupiers at the time of their last ELSA interview but were not reported to have housing wealth by the time of their death – this could plausibly be because they had sold their property over the intervening period.

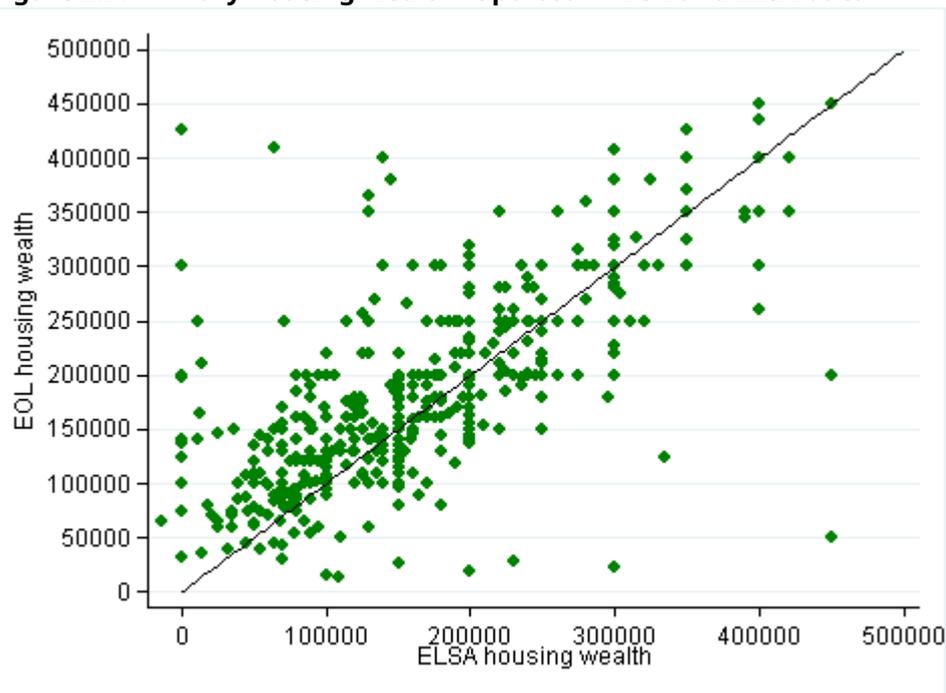
Table 2.5. Comparing ownership of assets in ELSA and EoL data

<i>Share of the sample</i>	EoL: had pension	EoL: no pension	EoL: didn't know
ELSA: had pension	38%	13%	3%
ELSA: no pension	7%	36%	2%

<i>Share of the sample</i>	EoL: had life insurance	EoL: no life insurance	EoL: didn't know
ELSA: had life insurance	16%	16%	1%
ELSA: no life insurance	9%	55%	3%

<i>Share of the sample</i>	EoL: had housing	EoL: no housing
ELSA: had housing	62%	8%
ELSA: no housing	2%	29%

Note: Sample is 977 individuals for private pension membership and 846 individuals for life insurance and housing ownership (as these questions are only asked of those whose estates had been distributed).

Figure 2.5. Primary housing wealth reported in EOL and ELSA data

Note: Excludes 3% of observations where housing wealth reported in ELSA or the EOL data is over £500,000.

Figure 2.5 compares the value of primary housing wealth as reported in the EoL data (by the 86% of the relevant sample for whom a value was reported) with the value last reported by the deceased individual to ELSA. Each green dot is an individual, and if housing wealth reported in the EOL data and the ELSA data were the same then all the dots would lie on the black 45-degree line. (As described above, variation around this line would be expected due to movements in house prices between the two interviews.) While there are a few large outliers, there is a high degree of correlation between the two reports of primary housing wealth. Excluding some outliers as is done in Figure 2.5 (approximately 3% of the sample), the correlation is 0.7178.

While these validation exercises are limited by the availability of suitable external data, the comparisons that we have been able to make do not suggest that the EoL respondents have poor knowledge of the circumstances or assets of the deceased ELSA member. This should lend some confidence to the answers given in the EoL interview by the proxy respondents.

3. Data contents

The EoL interviews collect information about the deceased in four broad areas:

- circumstances around death;
- health in the last years of life;
- expenses preceding and associated with death;
- assets and asset distribution after death.

In this chapter, we provide more detail on the data that are collected in each of these areas and present some initial descriptive statistics to give an overview of the circumstances of deceased ELSA respondents. To compensate for the small degree of non-representativeness of the EoL data compared with the full sample of ELSA respondents who have died, the data are weighted using inverse probability weights (described in Section 2.1). Unweighted results, which are only minimally different, are available on request.

3.1 Circumstances around death

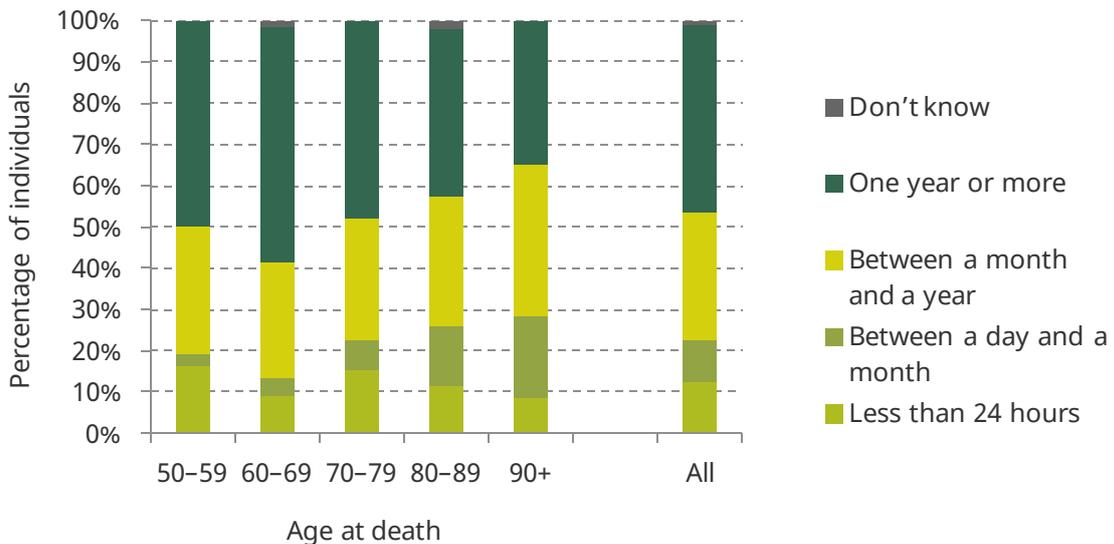
The EoL interview collects information on:

- timing and cause of death;
- location of death and accommodation during the last two years of life;
- employment since last ELSA interview.

Timing and cause of death

The EoL interview asks for some relatively objective information about the timing and cause of the individual's death (the results of which are described in Section 2.3). This is then followed by questions about how long they had been ill before they died and whether their death was expected or unexpected.

Figure 3.1. How long individuals were ill before death



Almost half of proxy respondents (46%) reported that the individual's death was unexpected. Figure 3.1 describes responses pertaining to how long the individual had been ill before death. Nearly half of individuals (46%) had been ill for a year or more before death, while at the other end of the spectrum 12% had been ill for fewer than 24 hours or were not ill before they died. Very few proxy respondents reported that they did not know how long the individual had been ill.

Location of death and accommodation in last two years of life

The majority of individuals (56%) were reported to have died in hospital (or en route to hospital). Nearly a quarter (23%) were reported to have died at home, 7% in a hospice and 13% in a nursing or residential care home.

In addition to where they died, the EoL interviews collect data on the other places the deceased respondent stayed overnight 'because of his/her health' during the two years before death. Taken together with location of death, 80% of individuals had spent some time in hospital in the last two years of life (56% had spent some time in hospital excluding the occasion at which they died), 10% had spent some time in a hospice, 12% in a nursing home and 9% in a residential home.

The EoL data contain information on how many occasions the individual stayed in each of these types of accommodation, and in total how long they stayed in each, over the past two years. The latter is documented in Table 3.1 for the main accommodation types.

Table 3.1. Accommodation for health reasons in the last two years of life

	Percentage who stayed at all in last two years	Of whom stayed (in total) for:			
		Less than one week	One week to one month	One month to six months	Six months or more
Hospital	80%	49%	33%	16%	3%
Hospice	10%	69%	27%	2%	1%
Nursing home	12%	25%	19%	30%	26%
Residential home	9%	19%	15%	29%	37%

Employment

The EoL interview collects data on whether the individual had done any paid work since their last ELSA interview, so that a complete employment history is available for these respondents from the time they first started responding to ELSA. Information is elicited on whether work was full or part time, whether the individual had stopped working before their death and, if so, when and why they stopped working. Only around 2% of individuals were reported to have been working at the time of their death.

3.2 Health in the last years of life

The EoL interview collects information on:

- difficulty with activities of daily living and help received;
- cognitive ability;

- mental health and problem behaviours;
- eyesight and hearing;
- cardiovascular and other chronic conditions;
- joint replacement and resurfacing.

These questions aim to complete the health history that has been available since the deceased individuals started responding to ELSA. The EoL health data are most meaningfully interpreted in the context of either: (i) the previous health data on these individuals, so that the full history of health at older ages can be examined; or (ii) the health of otherwise similar individuals who have not died, since this will enable separation of changes in health that are associated with death from changes in health that are associated with ageing more generally. Given this, in this section, we primarily describe what data are collected by the EoL interview and present a few summary statistics derived from them.

Difficulty with activities of daily living

Respondents are asked whether the deceased needed any help with a number of activities of daily living or instrumental activities of daily living during the last three months of their life. Over four-fifths of individuals were reported to have had difficulty with at least one of the activities asked about. The most commonly cited activity requiring help was shopping for groceries, followed by bathing and preparing hot meals (shown in Figure 3.2).

The EoL interview goes on to ask how long the individual had been requiring help with each activity, and who usually helped them with any of the activities that they had problems with. Figure 3.3 describes the proportion of those who had difficulty with at least one activity who were reported to usually receive help from some of the types of individuals asked about. Nearly half (42%) are reported to have usually received assistance from a partner, and 22%/30% from a son/daughter; 9% were reported to usually receive

Figure 3.2. Prevalence of difficulties with daily activities

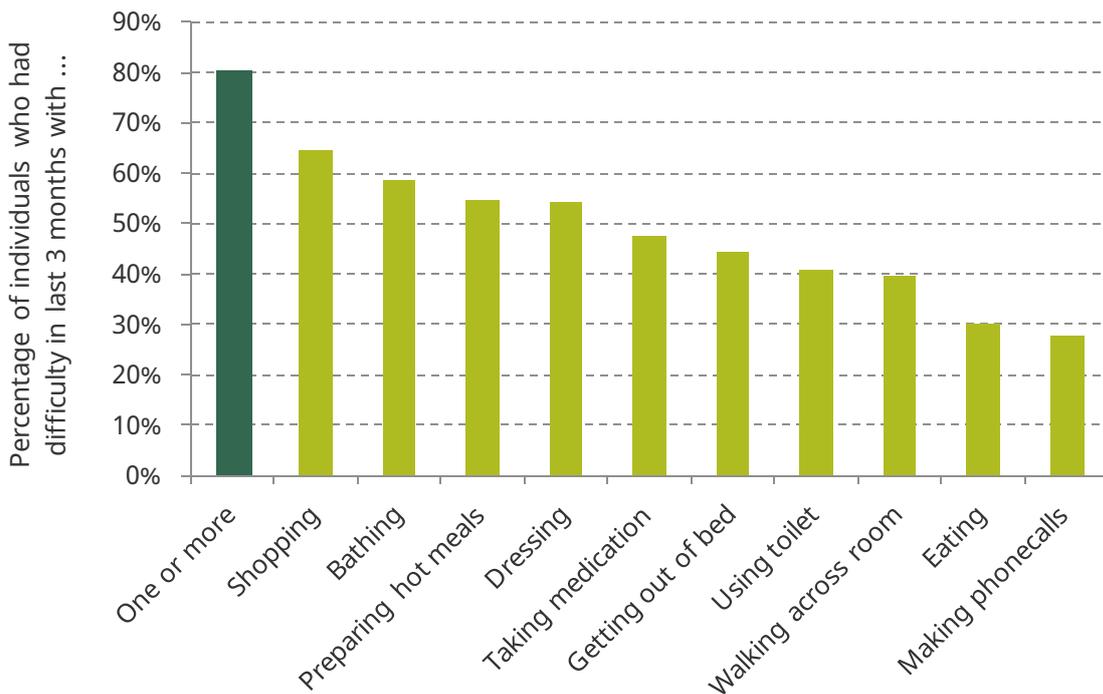
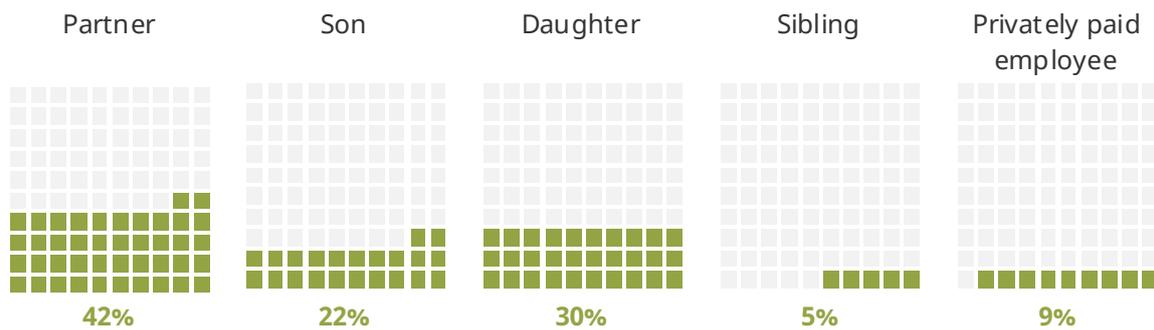


Figure 3.3. Percentage of those with at least one difficulty who got help from:

help from a privately paid employee (equating to 7% of all individuals, if those who had no difficulties received no assistance from privately paid employees). This suggests that while some individuals incur expenses for social care (received at home) towards the end of life, this is only a small minority.

Cognitive ability

The EoL interview asks respondents several questions about the deceased individual's memory (such as their difficulty remembering birthdays, remembering telephone numbers or recalling conversations had a few days earlier) and their concentration (such as their difficulty following a story, making decisions or handling financial matters). Where difficulties were reported, respondents were asked how long they had been present and whether they had come on gradually or suddenly.

Mental health and problem behaviours

The EoL interview asks a number of questions about the deceased individual's mood in the last year of his or her life. Figure 3.4 describes the answers to the question 'How often do you think [the deceased] felt contented or at peace during his/her last year' and to the same question asked about the last three months of life. It is notable that the proportion answering 'often' declines significantly when the time horizon is the last three months, rather than the last year, suggesting that individuals' contentment declines in the run-up to their death. Figure 3.4 also describes how the answers to this question differ, depending on whether the deceased had a surviving spouse or not. Those who had a surviving spouse are more likely to be reported to have been 'often' contented or at peace than those without. This may be because those with partners are more content than those without. However, it could also be driven by partners observing a greater proportion of an individual's time and mood (and times when the individual's mood is quite different from when they are interacting with other family or friends), or it could reflect reporting biases of partners (for example, if partners are more likely to think a given individual is content than other family members or friends are).

Figure 3.5 describes how often the deceased was reported to have felt contented or at peace during the last year / last three months of life split by how long the individual was reported to have been ill before they died. This clearly shows that those who had been ill for longer periods of time were reported as having been less frequently contented or at peace. Among those who had been ill for a year or more, only 28% were reported to have been 'often' contented or at peace in the last three months of life, compared with 65% of those who died having been ill for less than 24 hours.

The EoL interviews also collect data on whether the deceased individual exhibited any problem behaviours in the last year of their life, such as temper tantrums, violent threats, breaking things on purpose or causing complaints. While the reporting of temper tantrums is relatively common – reported as occurring ‘often’ or ‘sometimes’ by nearly 20% of respondents, most other problem behaviours were relatively rare – each reported as ‘often’ or ‘sometimes’ by fewer than 10% of respondents.

Figure 3.4. How often deceased felt contented or at peace during the last year / last three months, by whether had a surviving spouse

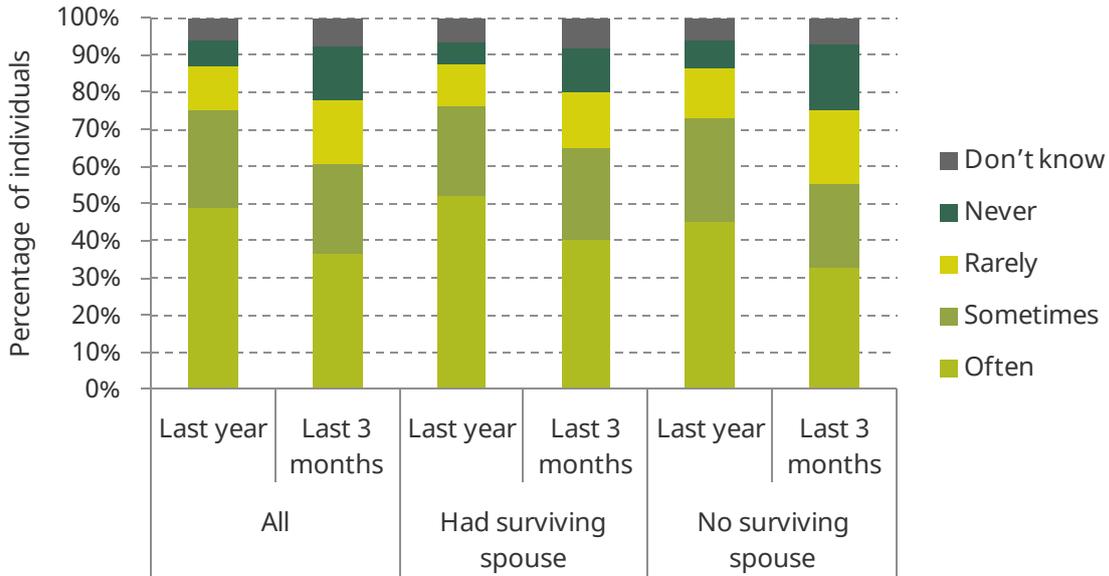
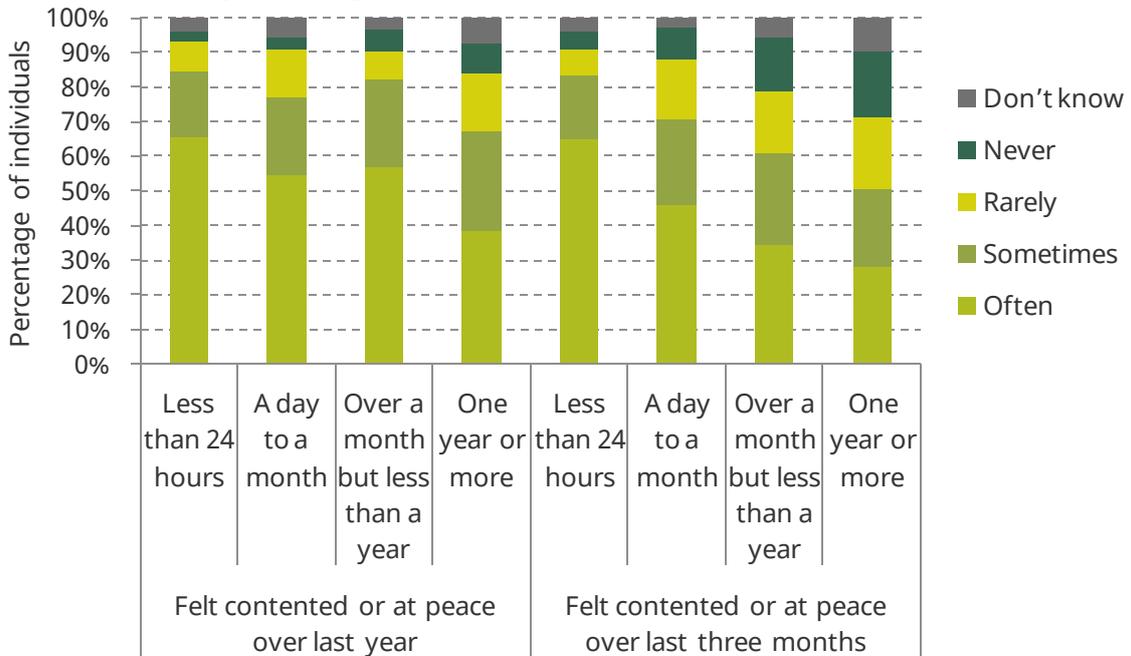


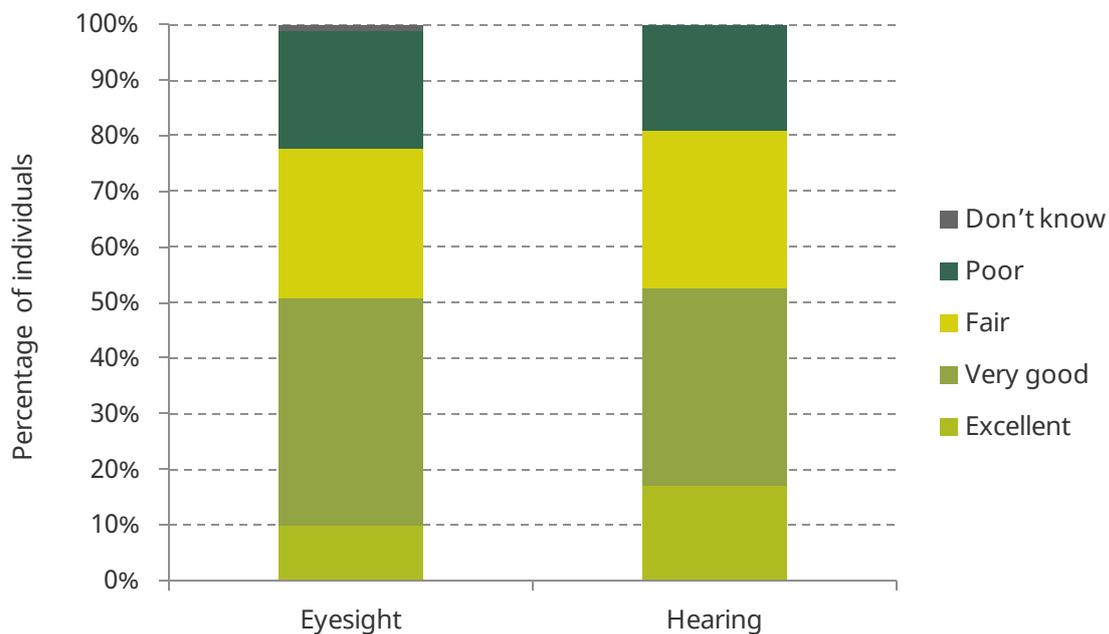
Figure 3.5. How often deceased felt contented or at peace during the last year / last three months, by how long ill before death



Eyesight and hearing

EoL respondents are asked how good the deceased's eyesight and hearing were in the last three months of their life (using glasses or hearing aids as usual). Virtually the same proportion of individuals were reported to have had fair or poor eyesight (48%) as fair or poor hearing (47%), but the proportion reported to have excellent hearing (17%) was considerably higher than the proportion reported to have excellent eyesight (10%). This is summarised in Figure 3.6. The EoL interviews also collect data on whether the individual had any doctor-diagnosed eye conditions (glaucoma, diabetic eye disease, macular degeneration or cataracts).

Figure 3.6. Eyesight and hearing quality



Cardiovascular and other chronic conditions

The EoL interview asks whether the deceased had ever had any doctor diagnoses of cardiovascular conditions (such as high blood pressure, angina, heart attack, congestive heart failure, heart murmur, diabetes or stroke) or any chronic conditions (such as lung disease, asthma, arthritis, osteoporosis, cancer, Parkinson's disease, Alzheimer's disease or dementia). Depending on the conditions reported, there are then follow-up questions such as when the individual was first diagnosed, what type of the condition the person had, and whether they took any medication during the last year of life.

Joint replacement and resurfacing

The EoL interview asks whether the deceased ever had an artificial joint (such as a hip, knee or finger) implanted and, if so, when this was done. (Note that in the wave 4 EoL interview, the questions were changed to refer to joint replacement or resurfacing rather than artificial implants.)

3.3 Expenses preceding and associated with death

The EoL interviews collect data on:

- medical treatment outside the NHS;
- funeral expenses.

In each case, the focus is on whether the individual had insurance to cover these costs and, if not, what the out-of-pocket expenditure was and who paid for it.

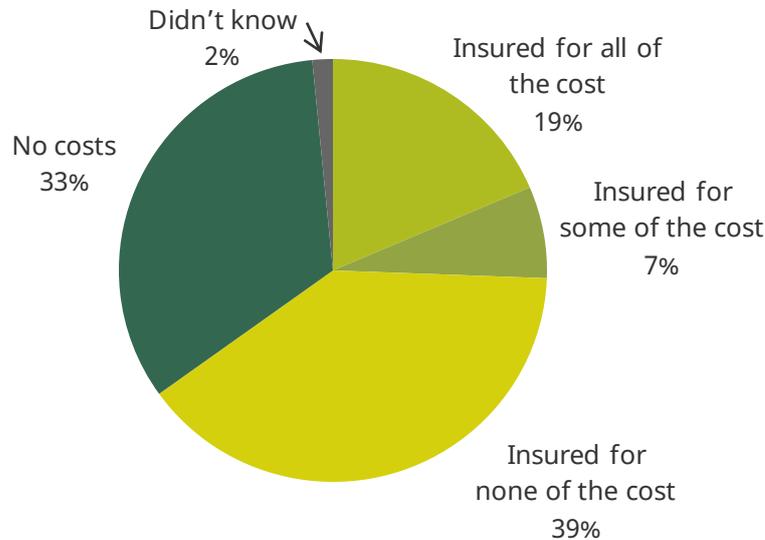
Medical expenses in the last year of life

The EoL interview asks whether the deceased individual 'received any medical treatments other than those on the NHS' in the last year of life. 13% of individuals were reported to have done so. Given the way the question is worded, it is probably unlikely that individuals' receipt of social care services (which are not provided by the NHS) are captured here, though that will depend on the services an individual received and how the proxy respondent interprets the question.

For those individuals who were reported to have received medical treatments outside the NHS, the EoL interview then asks whether any of the costs were covered by private health insurance. Where insurance covered part or none of the costs, the interview asks how much the individual paid, how those costs were financed, and whether (and how much) children, other relatives or others contributed to the cost.

Figure 3.7 describes insurance coverage for the 13% of deceased individuals who had some medical treatment outside the NHS. 26% of these individuals – equivalent to 3% of all deceased individuals – reported insurance covered some or all of the cost, while 33% reported that there was no cost involved. (This is slightly different by age: among those aged 50–69 when they died, 29% reported some insurance, compared with 25% among those who died when aged 70 or over.) Put a different way, just 6% of deceased individuals faced some out-of-pocket costs for medical treatment outside the NHS.

Figure 3.7. Insurance coverage, for those who received non-NHS medical treatment

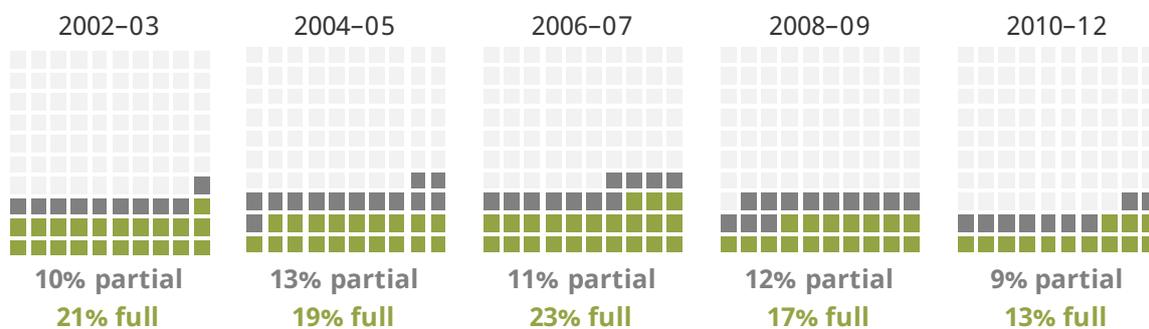


Funeral expenses

Unlike non-NHS medical treatment, all deceased individuals (or rather their survivors) incur funeral costs. Figure 3.8 describes the coverage of insurance for funeral expenses. In total, 18% of deceased individuals were known to have insurance that covered the cost of their funeral and a further 11% had insurance that partially covered the cost. The proportion of individuals with insurance for funeral costs declined over the 10-year period 2002–12.

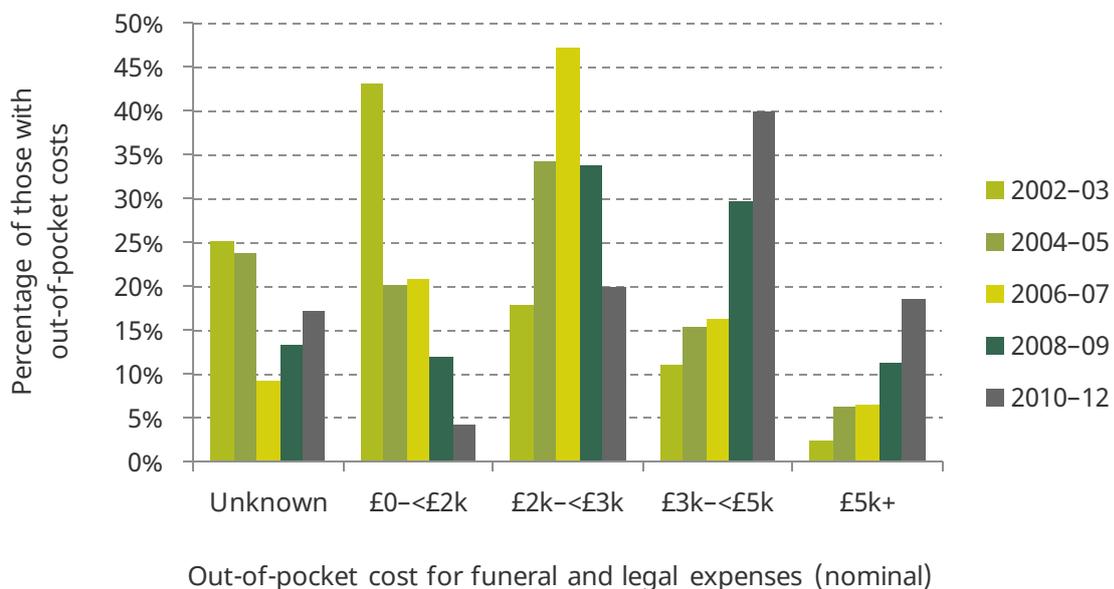
Not only did the proportion of people having their funeral paid for out-of-pocket increase, but the cost of funerals also went up markedly over this period. The median out-of-pocket cost for those without full insurance who died in 2002 or 2003 was £1,700. It increased to £2,200 for 2004–05, £2,300 for 2006–07, £2,800 for 2008–09 and £3,500 for 2010–12 (all in nominal terms). The level of and increase in reported funeral costs over this period are in

Figure 3.8. Coverage of full and partial insurance for funeral costs, by year of death



Note: Sample sizes are 160, 245, 184, 210 and 178.

Figure 3.9. Out-of-pocket funeral costs, by year of death



Note: Figures are not adjusted for inflation.

line with estimates of the average cost of a basic funeral reported by SunLife.⁴ The distribution of out-of-pocket funeral costs is shown in Figure 3.9.

The EoL interview also elicits information on who contributed to the cost of the funeral and by how much.

3.4 Assets and asset distribution after death

The EoL interviews collect data on:

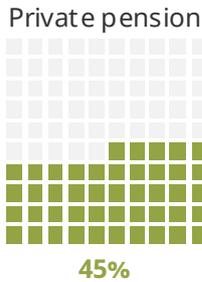
- administration of the estate;
- private pensions;
- life insurance;
- primary housing wealth;
- other property wealth;
- business assets;
- other assets.

The objective is to collect complete data on the stock of assets that the deceased individual had when they died and what happened to these assets (i.e. who inherited them or who the beneficiaries were).

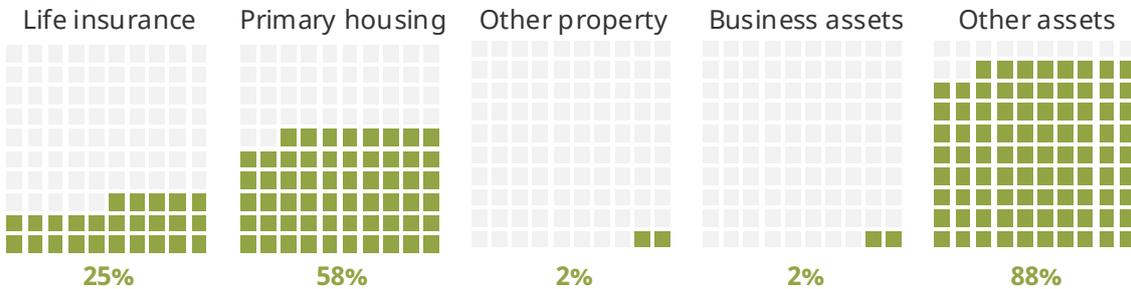
The questions about private pensions are asked of all proxy respondents. The questions about life insurance and all other forms of wealth are only asked where the proxy

Figure 3.10. Coverage of different asset types

Among all individuals



Among individuals whose estates had been distributed



Note: Sample size is 977 for all individuals and 846 (87%) for those whose estates have been distributed. Where proxy respondents report 'Don't know', the deceased individual is counted as not having the asset in question.

⁴ SunLife, 'Cost of Dying Report 2017: a complete view of funeral costs over time', 2017, <https://www.sunlife.co.uk/siteassets/documents/cost-of-dying/cost-of-dying-2017.pdf>.

respondent first answered that the deceased's estate had been distributed.⁵ The statistics in this section are therefore predominantly shown for the 87% of the EoL sample for whom the proxy respondent reported that the estate had been distributed.

Figure 3.10 summarises the prevalence of different assets among the deceased individuals. Nearly half of individuals (45%) had a private pension when they died and 25% had life insurance. Over half (58%) were owner-occupiers. Very few individuals owned other property or business assets. Most individuals, however, had other assets outside of property, pensions and business assets that were bequeathed when they died.

Administration of the estate

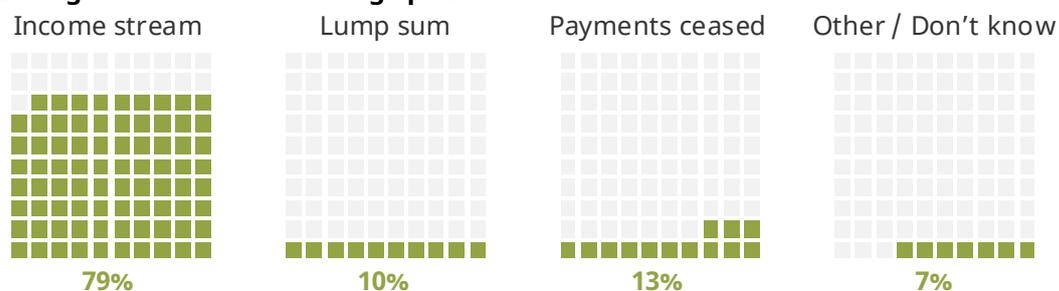
The EoL interview collects data on who had a will, whether the will needed to go through probate and whether it had done so (for those with a will), whether the proxy respondent was an executor and/or beneficiary of the will (for those with one) and who the next of kin was (for those without a will). 68% of deceased individuals had a will (67% of those with a surviving spouse and 69% of those without). Around half (48%) of those wills needed to go to probate, and virtually all of these (97%) had been through probate by the time of the EoL interview.

Private pensions

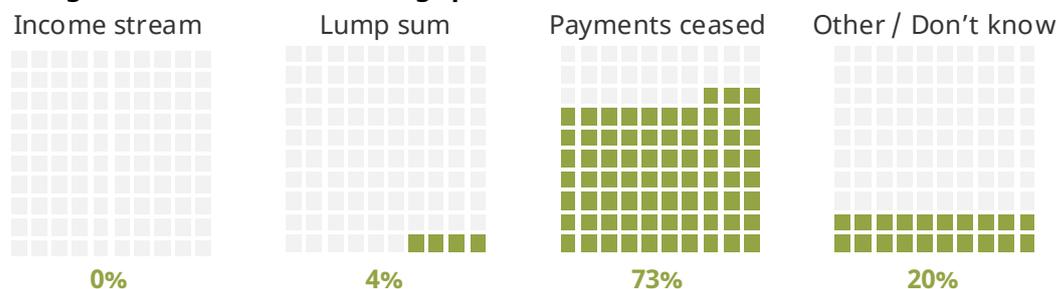
The EoL interview asks how many private pensions the deceased individual had and what happened to those pensions – i.e. whether there was any one-off or continuing payout from the pension and, if so, who was/is the beneficiary.

Figure 3.11. What happened to private pensions

Among those with a surviving spouse



Among those without a surviving spouse



Note: Percentages are among those with one or more private pension. Sample size is 289 for those with a surviving spouse and 164 for those without a surviving spouse. Figures could sum to more than 100 since, while each pension can only appear under one of the four options, individuals can have multiple pensions that do different things.

⁵ This additional filter for these questions applied in the EoL interviews conducted alongside waves 3, 4 and 6 of ELSA; in wave 2, the EoL interviews collected information on non-pension assets from all proxy respondents.

As described above, nearly half of the sample were reported to have at least one private pension at the time of their death (52% of those with a surviving partner and 38% of those without). The responses concerning what happened to these pensions are set out in Figure 3.11 and are very much in line with what would be expected given normal scheme rules for private pensions. Where a deceased individual did not have a surviving spouse, payments virtually always ceased (or the respondent did not know what happened to the pension). Where there was a surviving spouse, 79% of deceased individuals had a partner who was receiving (or expecting to receive) regular payments. (The EoL interview also collects data on who received / is receiving / is expecting to receive the regular income and/or lump sum, and what the value of each is.)

Life insurance

A quarter of deceased individuals (25%) were reported to have had life insurance (26% of those with a surviving partner and 24% of those without). Among those with a surviving partner, the partner was virtually always (97% of the time) a beneficiary, while there are only a very small number of cases in which a child or grandchild is reported to have benefited. Where there was no surviving spouse, in 70% of cases the beneficiary was known to have been a child (or children). In 12% of cases the respondent did not know who the beneficiary was.

Figure 3.12 sets out the distribution of the (total) payout from individuals' life insurance policies. In contrast to much of the rest of the EoL interview, there is a high quantity of 'Don't know' responses. Where the payout is known, it tends to be relatively small: 43% were for less than £2,000, while only 17% were for £10,000 or more. The median total payout among those where it is known was £2,000. (In addition to the total payout, the EoL interview asks how much each type of family member received.)

Figure 3.12. Distribution of total payout from life insurance



Primary housing

Over half of individuals had owner-occupied housing when they died (72% of those who had a surviving spouse and 44% of those who did not). The median value (among those where the value was known) was £170,000.

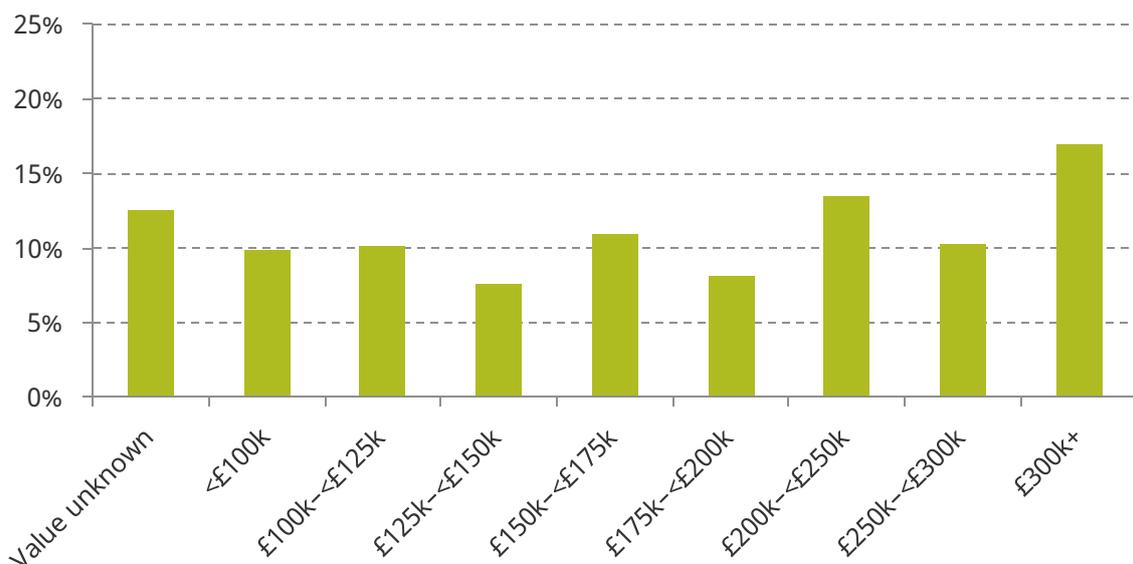
What happens to housing wealth upon death depends on whether the individual owned their property jointly. If the deceased individual was a 'joint tenant', then their housing wealth would pass automatically to the other owner(s) when they died. If the property was not owned jointly (or was owned as 'tenants in common' – where each owner owns a specified share of the property), then there would be no automatic inheritance.

Unsurprisingly therefore, where individuals were survived by a spouse or partner, that partner typically inherited all the housing wealth. Among owner-occupiers who had a surviving spouse, 86% left their housing wealth entirely to their partner. Figure 3.13 shows the distribution of net house values for these individuals. The median value (among those for whom a house value was reported) was £182,000 and the mean £206,000.

There were, however, a few owner-occupiers with a surviving partner who did leave primary housing wealth to other individuals: 4% left their housing wealth to their partner jointly with others and only 10% left none of their housing wealth to their partner. Among those who gave some or all of their housing wealth to other relatives or friends, 81% gave some or all to their children and 12% gave some or all to their grandchildren.

Where there is no surviving spouse, children were the most common beneficiaries of housing wealth: children inherited housing wealth from 75% of deceased respondents who were not survived by a spouse, while siblings inherited from 13% and grandchildren from 7% (78%, 59% and 71% had children, siblings and grandchildren respectively).

Figure 3.13. Distribution of house values: those whose surviving spouse inherited all

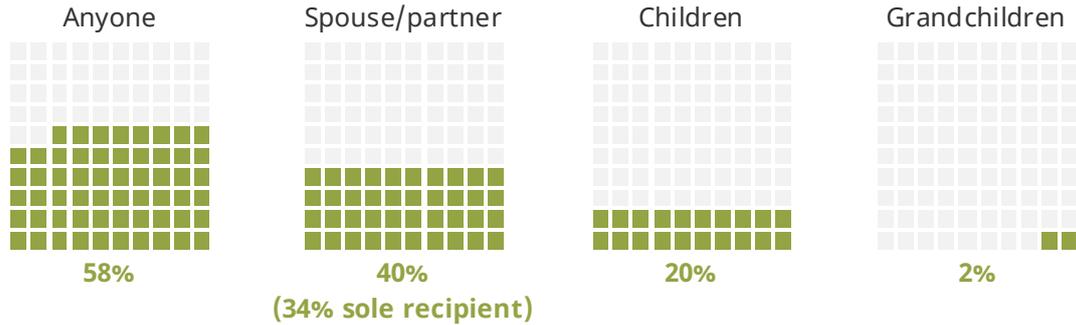


Note: Sample is those whose estates had been distributed, who owned their main home and whose surviving spouse or partner inherited all the housing wealth. N=317.

Taken together, primary housing wealth was bequeathed outside of a surviving partner by 46% of deceased owner-occupiers and 27% of all individuals.⁶ Housing wealth was bequeathed to children by 20% of all individuals and to grandchildren by 2% of all individuals (summarised in Figure 3.14).

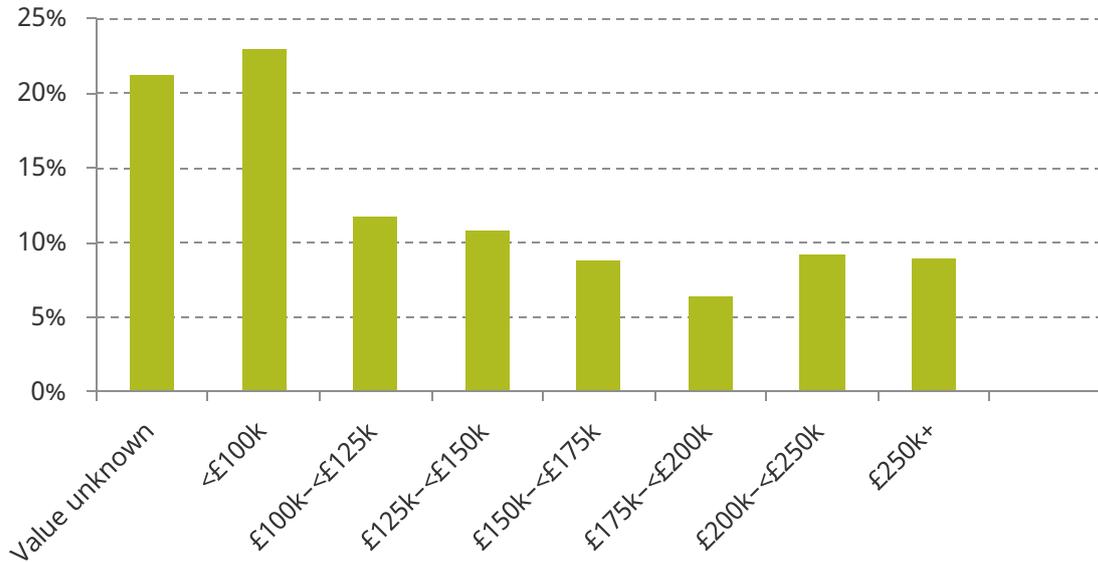
The distribution of the total amount of housing wealth bequeathed by each individual who did not leave everything to their spouse is shown in Figure 3.15. The median value (among those for whom a value is known) is £135,000, while the mean value is £151,000.

Figure 3.14. Prevalence of bequest of primary housing, by relationship of recipient



Note: Sample is 846 individuals whose estates had been distributed.

Figure 3.15. Distribution of total housing wealth bequeathed (where spouse did not inherit all)



Note: Sample is those whose estates had been distributed, who owned their main home, and who either did not have a surviving partner (N=170) or whose surviving spouse or partner did not inherit all the housing wealth (N=48).

⁶ 46% = 14% of the 63% of homeowners who had a surviving partner + 100% of the 37% of homeowners without a surviving spouse. 27% = 46% of the 58% of individuals who were homeowners + 0% of the individuals who were not homeowners. All figures are calculated from the subsample of EoL individuals whose estates had been distributed.

In addition to information on who inherited any housing wealth, the EoL interviews collect data on who currently lives in the property and, if no one, what has happened to it (for example, whether it is empty, let out, on the market or sold).

Other property

The EoL interview asks about the individual's holding of property (outside of the main home): whether this was held jointly, who inherited it, what the value (and any outstanding mortgages) was, who lives in it now and what has happened to the property. However, only 2% of individuals (whose estates had been distributed) were reported to have had other property wealth.

Business assets

There are also detailed questions relating to business assets: what the assets were worth and who inherited how much from them. However, only 2% (of those whose estates had been distributed) were reported to have had business assets.

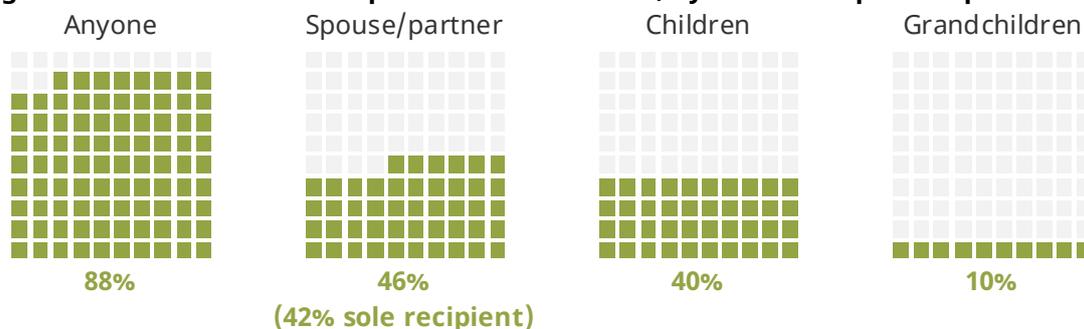
Other assets

Where an individual's estate had been distributed (and where their will had been through probate, if applicable), the proxy respondent is asked 'Excluding any housing, pensions, or businesses, who inherited the rest of [the deceased's] assets?' and provided with a list of individuals (husband/wife, partner/cohabitee, natural son/daughter, etc.) from which multiple recipients can be selected. One option is 'No other assets inherited'. This option was chosen by 12% of respondents – implying that 88% of individuals had some other assets (as reported in Figure 3.10).

Among individuals with assets who were survived by a partner, 82% left all their other assets to their partner; 15% gave some or all of their assets to children (90% had children), while 6% gave some or all of their assets to their grandchildren (83% had grandchildren).

Among individuals with assets who were not survived by a partner, 77% left an inheritance to children (81% had children), 16% to grandchildren (74% had grandchildren) and 11% to one or more siblings (57% had living siblings) – figures sum to more than 100% as a deceased individual can, for example, leave an inheritance to both children and grandchildren.

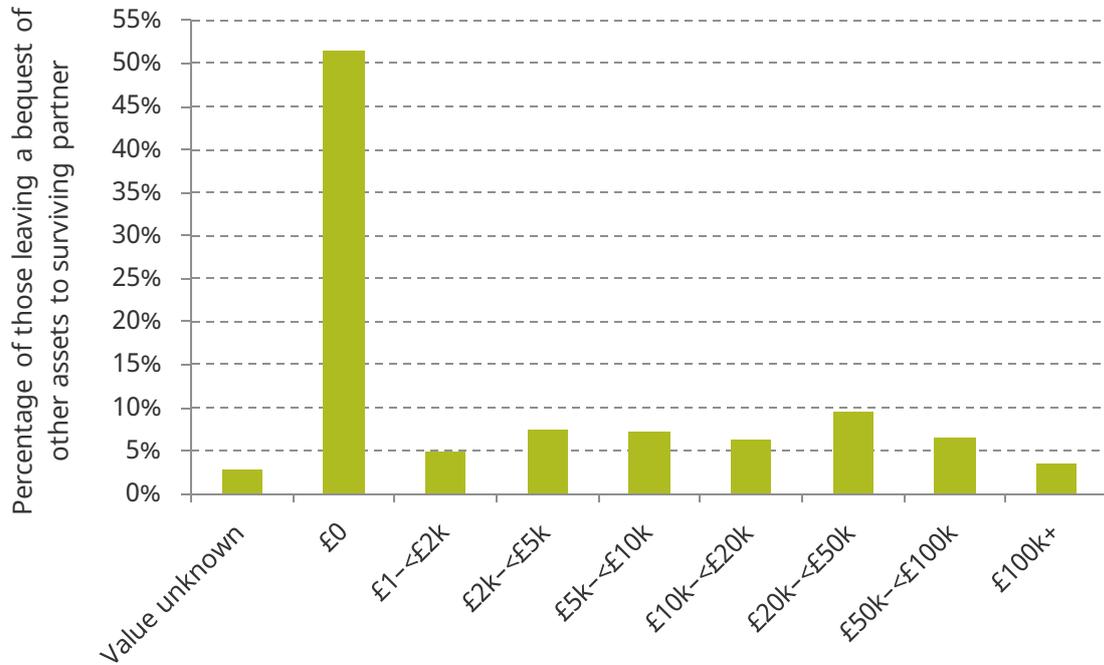
Figure 3.16. Prevalence of bequest of 'other assets', by relationship of recipient



Note: Sample is 837 individuals whose estates had been distributed and whose wills had been through probate (if applicable).

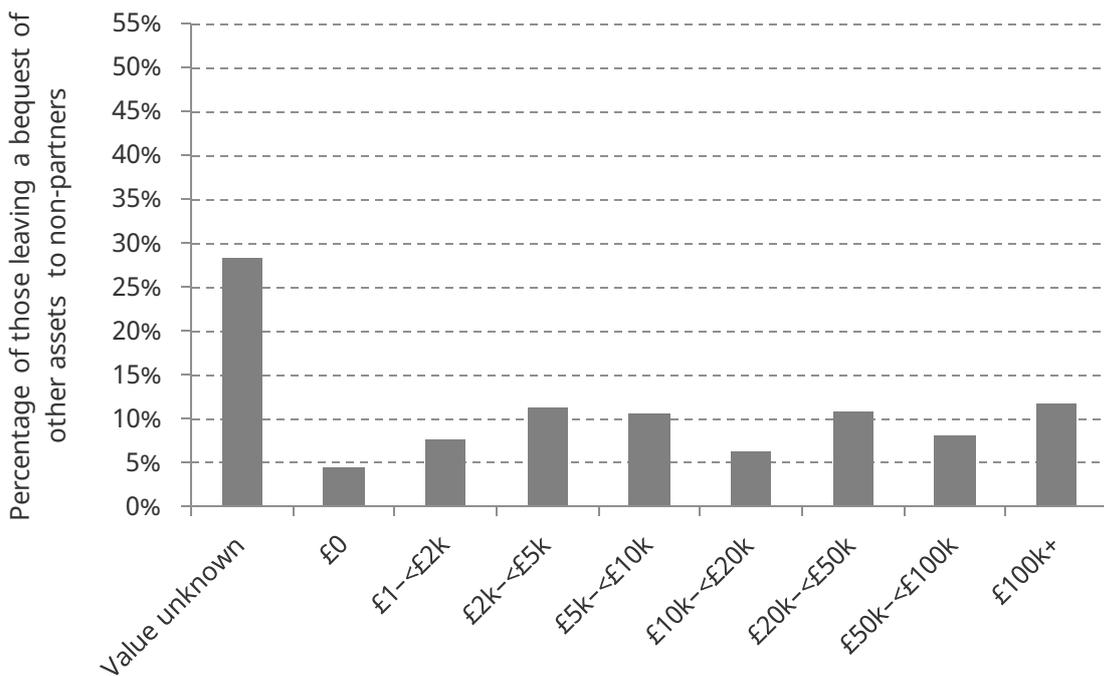
Taken together, an inheritance (excluding housing wealth, business assets or private pensions) was made outside of a surviving partner by 58% of those with assets and 51% of all individuals. Among all those with assets, 45% left an inheritance to one or more children and 11% left an inheritance to one or more grandchildren; among all individuals, these proportions are 40% and 10% respectively.

Figure 3.17. Distribution of the value of inheritances received by surviving partners



Note: Sample is 392 individuals who left an inheritance to a surviving partner.

Figure 3.18. Distribution of total value of bequests to non-partners



Note: Sample is 381 individuals who left an inheritance to at least one individual who was not their partner.

The distributions of inheritances received by partners, and total bequests to other individuals, are shown in Figures 3.17 and 3.18 respectively. There are a large number of respondents reporting that a surviving partner inherited (some or all of) the individual's assets, but then reporting an inheritance value of £0. This likely reflects the fact that most assets are held jointly in a couple, and it is difficult to attribute a value to what is 'inherited'. Nearly 30% of proxy respondents who reported that someone other than a surviving partner received an inheritance did not know the value received by one or more individuals (the total value bequeathed shown here is calculated by summing the amounts reported to be received by each inheritor). Among those where a value was given, the median value of the total bequest made to individuals other than a surviving partner was £12,000, while the mean value was £51,000.

It is perhaps obvious, but important to note, that bequests are normally made to multiple individuals. This means that the size of each inheritance received is only a fraction of the size of the deceased individual's estate. Among those with financial assets who were not survived by a partner, 32% left their (non-housing) assets to one individual, 24% left them to two individuals, 16% left them to three individuals, and 26% left them to four or more individuals. The median value of inherited financial assets at the individual recipient level (from those who died without a surviving spouse) was £3,000 and the mean was £17,000. Individuals also often leave their assets to multiple types of relatives. Among those who were not survived by a partner, 60% left their (non-housing) assets only to their children, while 13% left them to their children and grandchildren, and 25% left their assets to other combinations of relatives and friends.

4. Conclusions

The ELSA 'End of Life' interviews are a unique attempt, among British household panel surveys, to collect information after the death of a survey respondent. Conducted with a relative or close friend, these interviews provide valuable information about the individual's health in the last two years of life, the expenses associated with their death, and their assets and the allocation of these after death. These data complete the history of certain dimensions of the individual's circumstances that have been collected ever since they first started responding to ELSA, and they provide unique information on the circumstances around death.

The analysis in this report has been a first look at the quality of, and information contained in, these EoL interviews. There are a number of implications of our findings for the administrators and data collectors of the ELSA survey. If EoL interviews are to be collected in future (they have not been since wave 6, and will not be again until at least wave 10), more work needs to go into identifying a suitable proxy and encouraging them to respond. Only a third of respondents who had died by 2012 have been captured in an EoL interview, due to a combination of lack of a suitable respondent, timing issues and non-response. In particular, attention needs to be paid to increasing EoL coverage among individuals who were single at the time of death and those who were not owner-occupiers, since these types of individual have so far been under-represented in the data collected.

An obvious concern with data of this type is how well the proxy respondent is able to answer questions about the deceased's circumstances at the end of life. We find that over 90% of proxy respondents were either a surviving partner or a child of the deceased and/or were an executor or beneficiary of the deceased's will. Furthermore, the limited amount of data validation that we have been able to conduct suggests that we can have some confidence in the responses given by the proxy respondents.

This report has presented some summary descriptives on a whole range of different topic areas – circumstances around death, health in the last years of life, expenses around death, assets and the allocation of the estate – in order to illustrate the breadth of the data available from the EoL interviews.

We have examined in some detail the data on assets and the allocation of the estate. This has yielded a number of interesting findings: for example, that for the most part potential inheritors must wait until the second individual in a couple dies before any bequests are made outside the household, and that bequests are typically made to multiple individuals and therefore the size of individual inheritances received is only a proportion of the value of the estate. These findings matter for the likely size and timing of the inheritances that younger generations will receive in future, which has implications for resource accumulation over their lifetimes.

There is, however, much further work on this topic that can be conducted with these data, and many other interesting questions in other areas that can be examined using other dimensions of the EoL data. We hope that this report will highlight the availability and potential usefulness of these data, and act as a springboard to encourage other researchers to use these unique data to their full potential.