



## **Methodology**

**June 2025**

# 1) Background

The Health, Aging, and Retirement in Thailand (HART) project is a sister study of the Health and Retirement Study (HRS), conducted by the Institute for Social Research (ISR) at the University of Michigan. Launched in 2009, HART has been implemented through the collaborative efforts of researchers and faculty from the Research Center, School of Applied Statistics, School of Development Economics, and School of Social Development, under the Center for Aging Society Research (CASR) at the National Institute of Development Administration (NIDA).

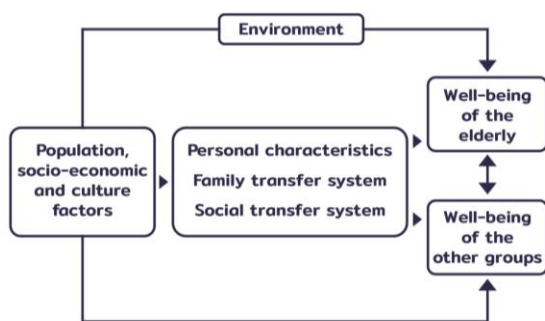
Two pilot surveys were conducted in 2009 and 2011, supported by research grants from the National Research Council of Thailand (NRCT) and the Commission on Higher Education (CHE), respectively. The national baseline survey (Wave 1) was initiated in 2014, followed by Wave 2 in 2016, Wave 3 in 2020, Wave 4 in 2022, and Wave 5 in 2024. Wave 6 is scheduled to begin in 2026.

Wave 3 was funded by the Thailand Research Fund (TRF), while the other waves have been supported by research grants from the NRCT under the Fundamental Fund (Basic Research). Data collected from the national surveys, starting from 2015, are archived and maintained at the NIDA Intelligence and Information Center (NIDA IIC).

# 2) Framework

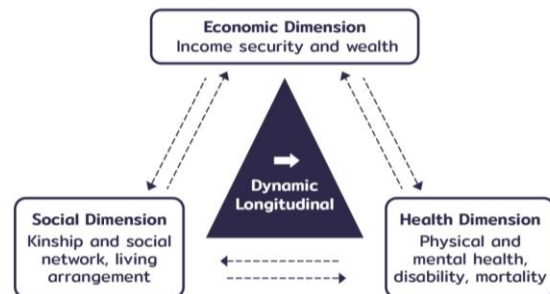
Well-being of older persons and dynamics in aging behaviors

Figure 1: Well-being of Older Persons



Source: Hermelin, Albert (2002). "Theoretical Perspectives, Measurement Issues, and Related Research," in *The Well-being of the Elderly in Asia: A Four Country Comparative Study*. Edited by Albert Hermelin. Ann Arbor: The University of Michigan Press. P.108

Figure 2: Dynamics in Aging Behaviors



Source: Borsch-Supan, Axel, Hendrik Jürges and Oliver Lipps. 2003. "SHARE: Building a Panel Survey on Health, Aging, and Retirement in Europe," Mannheim Research Institute for Economics of Aging (MEA). University of Mannheim, Germany. July.

### 3) Study design

HART is a biannual household panel survey designed to provide panel data on the multidisciplinary dimensions of aging in Thai older adults, including: (1) General Information, (2) Family and Support, (3) Health Status, (4) Work Status, (5) Income and Expenditure, (6) Asset and Debt, (7) Life Expectation, and (8) Exit Interview.

- **General Information:** Household data, Demographic Data, Social Activities, Social network
- **Family and Support:** Family Structure, Children, Engagement and care for grandchildren
- **Health Status:** Physical and Mental Health, Health Insurance, and Cognition
- **Work Status:** Present work, Retirement, Past Work
- **Income and Expenditure:** Covers household and personal income sources (e.g., earnings, pensions, transfers), and basic household and personal expenditure (e.g., housing, eating, consuming).
- **Asset and Debt:** Collects data on ownership of property, financial assets, and liabilities, including both individual and household-level economic standing.
- **Life Expectation:** Includes self-reported expectations about longevity and perceived future well-being and quality of life, used in studies of future planning and subjective aging.
- **Exit Interview:** Conducted when a participant exits the panel (due to death). Includes information from relatives or caregivers about the respondent's health and care before exit.

The 5,600 sample units represent the national households from five regions and Bangkok and vicinity. Thirteen provinces were selected as a household panel in the baseline survey. In each household, one member aged 45 years or older is selected as the respondent.

In addition to the older people population, the HART project also places significant emphasis on the population approaching old age, often referred to as the "pre-elderly" to study their readiness and preparation for aging in Thai society. The target population of the HART project includes Thai individuals aged 45 years and older, comprising both the elderly (aged 60 and above) and the pre-elderly (aged 45–59). As of the year 2015, this includes all individuals born before 1970.

HART employs face-to-face interviewing methods. One eligible member aged 45 or older is selected from each panel household as a primary respondent. Spouses (at any age, if any) are also interviewed for data relevant to family, transfers, and finances. Proxy interviews from the spouse or family member from the household are also utilized for frail respondents. For the Wave 2 survey, a proxy for deceased respondents is contacted for an exit interview. If the proxy for the exit interview (a spouse or a family member) is aged 45 or older, he/she will be eligible to be included as a new respondent for that household. Panel members who move away from the survey area are not followed in the survey. There are no biomarker data collected in the field survey of HART.

## 4) Instrumental development

The survey instrument used in the baseline study was a paper-and-pencil (PAPI) questionnaire. Most of the content included in the questionnaire was applied from the Korea Longitudinal Study of Aging (KLoSA) (See “Korean Longitudinal Study of Ageing”) and Chinese Health and Retirement Longitudinal Study (CHARLS) (See “China Health and Retirement Longitudinal Study”). Additional content in the questionnaires was developed to best suit the local context, especially with regards to family and transfers, health status, health care, and health care utilization. In Wave 2 of the survey, with technical assistance from HRS and the Survey Research Center (SRC) at ISR, the University of Michigan, the survey instrument was changed from PAPI to a computer-assisting personal interview (CAPI). Due to technical and logistical constraints, some contents from the questionnaire had to be modified by adapting to the HRS. Overall, however, the seven primary dimensions of the questionnaire remain the same in both surveys.

## Citation

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