

Resource Summary Report

Generated by [kravitz2](#) on Sep 4, 2026

Health and Retirement Study

RRID:SCR_008930

Type: Tool

Proper Citation

Health and Retirement Study (RRID:SCR_008930)

Resource Information

URL: <http://hrsonline.isr.umich.edu/>

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Description: A data set of a longitudinal panel study of health, retirement, and aging that surveys a representative sample of more than 26,000 Americans over the age of 50 every two years. The HRS explores the changes in labor force participation and the health transitions that individuals undergo toward the end of their work lives and in the years that follow. The study captures a dynamic picture of an aging America's physical and mental health, insurance coverage, financial status, family support systems, labor market status, and retirement planning. The sample in 2006 numbered over 22,000 persons in 13,100 households, with oversamples of Hispanics, Blacks and Florida residents. Beginning in 2006, half the sample received enhanced face-to-face follow-ups that included the collection of physical measures and biomarkers. HRS provides a research data base that can simultaneously support continuous cross-sectional descriptions of the US population over the age of fifty-five, longitudinal studies of a given cohort over a substantial period of time (up to 18 years by 2010 for the original HRS cohort, following them from age 51-61 to age 69-79) and research on cross-cohort trends. By 2010 the HRS will be able to support cross-cohort comparisons of trajectories of health, labor supply, or wealth accumulation for persons who entered their 50s in 1992, 1998 and 2004. The HRS also has provided the sampling frame for targeted sub-studies. The Aging, Demographics, and Memory Study (ADAMS) supplement on dementia involved a field assessment of a sample of about 930 HRS panel members aged 75+ to clinically assess their dementia status and dementia severity. Special topics including consumption and time use, prescription drug use and the impact of Medicare Part D, parents' human capital investments in children, and diabetes management by self-reported diabetics, have appeared on mail surveys that have used the HRS as a sampling frame. The HRS also can accommodate a number of experimental topics using Internet interviewing. The HRS is also characterized by links to a rich array of administrative data, including: Employer Pension Plans; National Death Index; Social Security Administration earnings and (projected) benefits data; W-2 self-employment data; and Medicare and Medicaid files. The HRS has actively collaborated with other longitudinal studies of aging in other countries (e.g., ELSA, SHARE, MHAS), providing

both scientific and technical assistance. Data Availability: All publicly available data may be downloaded after registration. Early Release data files are typically available within three months of the end of each data collection, with the Final Release following at 24 months after the close of data collection activities. Files linked with administrative data are released only as restricted data through an application process, as outlined on the HRS website. * Dates of Study: 1992-present * Study Features: Longitudinal, Minority Oversamples, Anthropometric Measures, Biospecimens * Sample Size: 22,000+ Link * ICPSR: <http://www.icpsr.umich.edu/icpsrweb/ICPSR/studies/06854>

Abbreviations: HRS

Synonyms: University of Michigan Health and Retirement Study, University of Michigan Health and Retirement Study (HRS)

Resource Type: biomaterial supply resource, material resource

Keywords: health, retirement, income, work, asset, pension plan, health insurance, disability, physical health, cognition, health care expenditure, interview, mental health, work status, retirement planning, adult, middle adult human, late adult human, questionnaire, retirement plan, family structure, demographics, housing, employment status, job history, attitude, preference, expectation, family relations, health care cost, medicaid, personal finance, social support, wealth, hispanic, african-american, minority, longitudinal, memory, consumption, time use, prescription drug use, medicare part d, diabetes management, diabetes

Related Condition: Aging, Dementia

Funding: U.S. Social Security Administration ;
NIA U01AG009740

Availability: Public: Must register and conditions of Use apply.

Resource Name: Health and Retirement Study

Resource ID: SCR_008930

Alternate IDs: nlx_151830

Record Creation Time: 20220129T080250+0000

Record Last Update: 20260904T000514+0000

Ratings and Alerts

No rating or validation information has been found for Health and Retirement Study.

No alerts have been found for Health and Retirement Study.

Data and Source Information

Source: [SciCrunch Registry](#)

Usage and Citation Metrics

We found 122 mentions in open access literature.

Listed below are recent publications. The full list is available at [kravitz2](#) .

Xu Q, et al. (2026) Association between cumulative average BMI and cognitive decline: a 24-year cohort study. *Journal of neurology*, 273(2).

Zhang Y, et al. (2026) Association of soluble tumor necrosis factor receptor 1 with tau pathology, brain atrophy, and cognitive decline: a longitudinal study. *BMC medicine*, 24(1).

Huang QM, et al. (2026) Insomnia symptom trajectories and incident cardiovascular disease in older adults: a longitudinal cohort study. *Heart (British Cardiac Society)*, 112(3), 153.

Xiang X, et al. (2026) Childhood mental health and major depression in later life: a survival analysis across 12 years. *Aging & mental health*, 1.

Jokela M, et al. (2025) Reporting heterogeneity in the associations between personality and health problems: Anchoring self-reports with health vignettes. *Journal of health psychology*, 30(11), 3064.

Kim ES, et al. (2025) Mastering the canvas of life: Identifying the antecedents of sense of control using a lagged exposure-wide approach. *Applied psychology. Health and well-being*, 17(1), e12618.

Ludwig-Borycz E, et al. (2025) Food insecurity and cognitive domains among older United States adults: Findings from the health and retirement study. *Alzheimer's & dementia : the journal of the Alzheimer's Association*, 21(7), e70480.

Elman MR, et al. (2025) Contribution of chronic conditions to mortality: Differences by race and ethnicity. *Aging and health research*, 5(2).

Jiang X, et al. (2025) Identification of blood-derived DNA methylation biomarkers of glaucoma and intraocular pressure measurements in three European ancestry cohorts including the Canadian longitudinal study on aging. *Epigenetics*, 20(1), 2566496.

Song S, et al. (2025) Long-term cumulative physical activity associated with less cognitive decline: Evidence from a 16-year cohort study. *The journal of prevention of Alzheimer's disease*, 12(6), 100194.

Nam GE, et al. (2025) The impact of cancer diagnosis on functional decline in adults aged 50 and older: the US Health and Retirement Study. *Journal of cancer survivorship : research and practice*.

Aljahdali AA, et al. (2025) Food insecurity and ultra-processed food consumption in the Health and Retirement Study: Cross-sectional analysis. *The journal of nutrition, health & aging*, 29(2), 100422.

Lin MJ, et al. (2025) The role of social and genetic factors in partnership trajectories and later life health. *Scientific reports*, 15(1), 44749.

Dhakal U, et al. (2025) Food insecurity, food assistance, and physical and cognitive functioning among older Americans. PloS one, 20(12), e0339720.

Galankin TL, et al. (2024) Clusterization of Behavioral and Psychological Symptoms of Dementia as Assessed by Neuropsychiatric Inventory: A Case Against the Use of Principal Component Analysis. Journal of Alzheimer's disease : JAD, 98(4), 1483.

Chen S, et al. (2024) Mental-somatic multimorbidity in trajectories of cognitive function for middle-aged and older adults. PloS one, 19(5), e0303599.

Huang QM, et al. (2024) Association of insomnia symptoms and trajectories with the risk of functional disability: a prospective cohort study. BMC geriatrics, 24(1), 492.

Aljahdali AA, et al. (2024) Ultra-processed foods consumption among a USA representative sample of middle-older adults: a cross-sectional analysis. The British journal of nutrition, 131(8), 1461.

Kulminski AM, et al. (2024) TOMM40 and APOC1 variants differentiate the impacts of the APOE ϵ 4 allele on Alzheimer's disease risk across sexes, ages, and ancestries. Alzheimer's & dementia (Amsterdam, Netherlands), 16(2), e12600.

Chen H, et al. (2023) Long-term variability in physiological measures in relation to mortality and epigenetic aging: prospective studies in the USA and China. BMC medicine, 21(1), 20.