P249 / Policy impacts on End-of-Life Decisions

Topic : Other

Chair : Jennifer Stewart (Carleton University)

GENERAL OBJECTIVES, RESEARCH QUESTIONS AND SCIENTIFIC RELEVANCE

Research Question

How do government policies and regulations shape individual and population health and health behaviours at the end of life? What empirical, theoretical, and methodological tools best identify these causal effects? We invite contributions that engage with topics related to aging, dementia, serious illness, and end-of-life care. How do financing, delivery models, and legal frameworks influence diagnosis, caregiving burden, care quality, place of death, and costs for older adults and people living with dementia? What are the effects of long-term care policy, guardianship rules, MAID/assisted dying statutes, advance-care planning, and palliative/hospice integration on outcomes and equity? How does policy change individuals' end-of-life decisions?

Context

Health care is a central issue for many families and represents a large share of government budgets in most countries. Health and health care interact with economic, demographic, environmental, political conditions and often involve difficult tradeoffs between competing moral goals. Aging populations, climate and heat risks, medical care costs, technological change, shifting industrial structure, and evolving social norms further complicate the policy landscape. Understanding the effects of public policies on health and other life course outcomes is essential for policy planning to address efficiency and equity issues.

Policy relevant research by economists, demographers, sociologists, political scientists, epidemiologists is important in estimating causal relationships, illuminating underlying causal mechanisms, and identifying problems, unmet needs, and unintended consequences. Institutional analysis and implementation science also have an important role to play. Governments increasingly face choices that trade off near-term fiscal sustainability against long-term health outcomes; high-cost therapies against equitable access; standardization against local tailoring. The panel situates itself at this intersection: we seek work that is methodologically strong and policy-relevent, sensitive to institutional detail, and attentive to distributional consequences.

State of the Art

Three currents define today's frontier:

Causal Inference & Novel Data. Advances in econometric and machine learning tools combined with increasingly rich administrative and clinical datasets (claims, EMR, registries, mortality linkages) have enabled research on a wider range of research questions that are relevant to health policy.

Health and Social Tradeoffs. Environmental exposures, social determinants, and public health infrastructure interact with medical care in complex ways. Evidence on how to design policies that are robust to behavioral adaptation, provider gaming, and geographic heterogeneity has a high priority. And research that clarifies tradeoffs between alternative social goals is of central importance.

CALL FOR PAPERS

How do government policies and regulations shape individual and population health and health behaviours around aging and at the end of life? Government policy of all types, health, environmental, or income support, can impact the health outcomes of the population and these impacts may be distinct at the end of life. We invite contributions that engage with topics related to aging, dementia, serious illness, and end-of-life care. How do financing, delivery models, and legal frameworks influence diagnosis, caregiving burden, care quality, place of death, and costs for older adults and people living with dementia? What are the effects of long-term care policy, guardianship rules, MAID/assisted dying statutes, advance-care planning, and palliative/hospice integration on outcomes and equity? How does policy change individuals' end-of-life decisions?

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We encourage papers that (i) assess policies relevant to end-of-life decisions and aging, (ii) unpack mechanisms, (iii) speak to implementers with clear policy counterfactuals, and (iv) provide new ways to measure and characterize social problems rooted in health, aging, and end-of-life decisions. Papers that present new methodological approaches to examining the impact of government policy will be considered. Methodological approaches can include quantitative and qualitative approaches. Papers from a variety of disciplinary approaches are encouraged.

We welcome empirical, theoretical, and methodological papers across all disciplines that examine the topics regarding aging and end of life decisions. Suitable topics include:
• Public health policies (vaccination, harm reduction, heat/air quality interventions) and their interactions with health-care systems.
• Equity-focused analyses (heterogeneous effects by SES, race/ethnicity, geography; disability and aging).
• Methodological innovations
• Comparative policy across countries or provinces/states; federalism and intergovernmental finance.