

## Differentials in active life expectancy by religion/religiosity among older adults in Singapore

Angelique Chan, Rahul Malhotra, Zachary Zimmer, Mary Beth Ofstedal, Carol Jagger, Chi-Tsun Chiu and Yasuhiko Saito

Previous studies showed relationships between religion and health status including mortality among older adults. However, these findings have not quantified the effect of religion on different aspects of physical and mental health and mortality. We are interested in quantifying the effect of religion/religiosity on health by estimating life, active life and inactive life expectancy based on nationally representative longitudinal survey of older adults conducted in Singapore in 2009, 2011 and 2015. Health status in the study is defined by difficulty performing ADL/IADL. Distribution at baseline in 2009 by religious denomination is: Christianity (756, 16.3%), Buddhism / Taoism (2448, 56.5%), Islam (999, 11.6%), other (358, 4.8%), no religion (439, 10.8%). Religiosity is measured by the frequency of attending religious services: every week (1589, 29.9%), every month (721, 16.0%), less than once a month (1018, 22.2%), not at all (1672, 31.8%).