THE EFFECT ON MENTAL HEALTH OF RETIRING DURING THE ECONOMIC CRISIS

MICHELE BELLONI, ELENA MESCHI and GIACOMO PASINI*

Department of Economics, Università Ca' Foscari, Venice, Italy

ABSTRACT

This paper investigates the causal impact of retirement on late-life mental health, a growing concern for public health, because major depressive disorders are the second leading cause of disability. We shed light on the role of economic conditions in shaping the effect of retirement on mental health by exploiting time and regional variation in the severity of the economic crisis across 10 European countries during 2004–2013. We use data from four waves of the Survey of Health, Ageing and Retirement in Europe and address the potential endogeneity of the retirement decision to mental health by applying a fixed-effects instrumental variables approach. The results indicate that retirement improves the mental health of men but not that of women. This effect is stronger for blue-collar men working in regions that have been severely hit by the economic crisis. These findings may be explained by the worsening of working conditions and the rise in job insecurity stemming from the economic downturn: under these circumstances, exit from the labour force is perceived as a relief. Copyright © 2016 John Wiley & Sons, Ltd.

Received 1 December 2015; Revised 7 April 2016; Accepted 20 May 2016

KEY WORDS: depression; stress; working conditions; retirement; IV fixed effect; recession

1. INTRODUCTION

The present study examines whether retiring during the recent economic crisis has led to benefits or losses in terms of mental health. Late-life depression is a serious and growing public health problem: the economic cost of depression is estimated at €118bn in Europe (Sobocki *et al.*, 2006) and \$83.1bn in the USA (Greenberg *et al.*, 2003).

There is a growing literature on the effects of retiring on mental health, but evidence collected before the recent crisis is not conclusive. Early works in social epidemiology find that retirement is associated with an improvement in mental health, while more recent contributions report either no association or a negative one (for a review of this literature, see Avendano and Berkman, 2015). Papers addressing the potential endogeneity of the retirement decision to mental health using panel data methods report mixed results. Dave *et al.* (2008) use US data from 2002 to 2005 and find a negative effect of retirement on mental health, while an opposite result is obtained by Jokela *et al.* (2010) and Mein *et al.* (2003) exploiting the Whitehall II study. Lindeboom *et al.* (2002) use a Dutch cohort study and find no effect of retiring on mental health (while other life events matter).

A potential reason for the inconclusiveness of these panel studies is that they do not account for the simultaneity issue that may arise from unobserved shocks in the individual environment affecting both mental health and the retirement decision. Recent studies exploit changes in pension eligibility to instrument retirement choices: Behncke (2012) uses three waves of the English Longitudinal Study of Ageing and finds that, while retirement increases the risk of being diagnosed with a chronic condition, it has no effect on mental health.

^{*}Correspondence to: Department of Economics, Università Ca' Foscari, Venice, Italy. E-mail: giacomo.pasini@unive.it

De Grip *et al.* (2012) use Dutch data and find strong evidence that postponing the statutory retirement age leads to a worsening of mental health among those affected by the policy change who are still at work. Gorry *et al.* (2015), applying the same method to the US Health and Retirement Study, find that retirement improves mental health (as well as life satisfaction). Charles (2004) combines three sources of data for the USA and exploits discontinuous retirement incentives in the Social Security System and changes in laws affecting mandatory retirement and Social Security benefits as a source of identification of the effect of retirement on subjective well-being. The author finds that retirement reduces the prevalence of depression and loneliness feelings. Coe and Zamarro (2011) rely on cross-country – rather than time – variation in the statutory retirement age, exploiting data from the first wave of the Survey on Health, Ageing and Retirement in Europe (SHARE); they conclude that retiring leads to lower depression scores. Eibich (2015) and Johnston and Lee (2009) apply fixed effects (FEs) and a regression discontinuity design to German and English panel data, respectively, and find that retirement has a positive effect on mental health.

To the best of our knowledge, no previous study has analysed the effect on mental health of retiring during a period characterised by a severe economic crisis. This paper relies on the panel component of SHARE comprising waves from 2004 until 2013. During this period, the recession hit different European countries and regions at different moments and with different intensities: exploiting geographical and time heterogeneity in the severity of the economic crisis, we are able to shed light on the underlying mechanism of how and why mental health can improve at retirement. In regions in which economic conditions worsened substantially, employers retrenched reducing monetary and non-monetary rewards from working, and workers' perception of the risk of being laid off increased (Benitez-Silva *et al.*, 2011; Eurofund, 2013). We argue that harsher labour market conditions lead to severe job-related stress, a key risk factor for old age depression (Lupien *et al.*, 2009). Retiring during the crisis can therefore be perceived as a relief and reducing depression scores.

Our identification strategy is based on an instrumental variable (IV) FE (IV-FE) model, whereby we control for unobserved time-invariant individual heterogeneity by including individual FEs and address the possible issue of retirement endogeneity by exploiting the exogenous variation in retirement behaviour induced by country-specific early and standard retirement pension rules. Our results show that retirement improves mental health of men working in regions severely hit by the crisis and highlight that this effect is stronger for (ex-) workers in blue-collar occupations, more intensively affected by the worsening of working conditions after the crisis. This evidence supports the stress-related explanation of the relation between retirement and mental health.

The remainder of the paper is organised as follows. Section 2 describes the data and the estimation method. Section 3 presents the results of the analysis. Section 4 reports a number of robustness checks, while Section 5 discusses the policy implications of our findings and draws some conclusions.

2. DATA AND METHODS

This study exploits data from SHARE. SHARE is a cross-national panel survey designed to provide comparable information on the health, employment and social conditions of a representative sample of the non-institutionalised European population aged 50+ years. We use four waves of the survey: wave 1 (interview years 2004–2005), wave 2 (2006–2007), wave 4 (2011–2012) and wave 5 (2013). The most recent wave is particularly useful for our scope, because it provides fresh evidence on the economic crisis. We select respondents from 10 countries included in all four aforementioned waves (i.e. Austria, Belgium, Denmark, France, Germany, Italy, the Netherlands, Spain, Sweden and Switzerland).

Two key variables included in SHARE are exploited in our study: the EURO-D depression score (Prince et al., 1999) and the self-reported job situation status. The EURO-D depression score is a standardised scale

¹We exclude the third wave (a retrospective life history interview) because it is not directly comparable with the other waves.

Table I.	Individual	pane	participation

Wave 1	Wave 2	Wave 4	Wave 5	N individuals	Per cent
X	X	X	X	1281	14.88
	X	X	X	1315	15.27
X	X	X		467	5.42
X	X		X	176	2.04
X		X	X	218	2.53
		X	X	3628	42.13
X	X			821	9.53
	X	X		316	3.67
	X		X	208	2.42
X			X	100	1.16
X		X		81	0.94

of depressive symptoms designed to enhance cross-national comparability. The EURO-D consists of 12 items: feelings of depression, pessimism, death wish, guilt, sleep, interest, irritability, appetite, fatigue, concentration, enjoyment and tearfulness.

As in many other studies (e.g. Bonsang *et al.*, 2012), the self-reported job situation status is exploited to define the variable *retired*. The latter is a dummy variable that takes the value 0 if the individual reports being in the labour force at the time of the interview and one if the individual reports being retired. The *retired* variable is adjusted using the information on the self-reported year of retirement: if the retirement status is missing, but an individual reports the retirement year in any wave, the retirement status is then filled in accordingly (about 1.4% of observations are thus adjusted). Inconsistencies in the self-reported retirement status between waves are resolved by assuming that retirement is an absorbing state as, for example, Jimenez-Martin *et al.* (1999): once an individual reports being retired in one wave, that individual is considered retired in all subsequent waves. It turns out that only a very small fraction of observations (less than 0.3%) are adjusted this way.

We select individuals aged 55–70 years (as in Eibich, 2015) who were working the first time they were observed in the panel (as in e.g. Behncke, 2012). Table I reports the pattern of individual participation in the panel: about 15% of the individuals were observed for four waves and around 25% for three waves. Attrition in SHARE is non-negligible, and any analysis regarding mental health could suffer from sample selection: if the probability of remaining in the survey were inversely related to the mental health of the respondent, then the retention rate of the panel component of the sample is affected by the variable that is the object of interest of our analysis. Following the strategy proposed by Lindeboom *et al.* (2002), we conduct two informal tests for the severity of selective attrition. First, we run a regression of the depression score on an attrition dummy (i.e. a dummy that takes the value 1 if the *i*th observation is not in the panel at time t+1), its interaction with the retirement dummy and the full set of controls including individual FEs: the attrition dummy and the interaction term are neither individually nor jointly statistically different from zero. Second, we regress the attrition dummy on the depression score plus controls and individual FEs and find no significant effect for the depression score, which means that individuals becoming more depressed are not more likely to leave the panel.³

Table II reports summary statistics of the variables included in the analysis. Women exhibit higher depression scores, are more often single or widowed and their household income distribution is shifted to the left. Additionally, about 42% (3648) of the sampled individuals retired throughout the analysed period. Some preliminary evidence on the relation between depression and retirement status can be found in Figures 1 and 2. They show, for men and women, respectively, linear predictions from FE models where the EURO-D score is explained by a full set of age dummies interacting with the *retired* dummy. Although the standard errors are

²Respondents who were disabled or self-reported as being a homemaker or in the residual 'other' category (about 14% of valid observations) were not considered in the analysis. This point distinguishes our study from that of Bonsang *et al.* (2012), who consider these categories the same as retired (not working for pay).

³The results of these tests are reported in the supporting information Table A1.

Women Men Observations Mean SDMin Max Observations Mean SDMin Max EURO-D depression score 10 583 2.25 2.06 0 12 11 377 1.55 1.72 0 12 0.27 0 Retired 10 583 0.44 0 1 11 377 0.27 0.44 1 10 583 60.53 3.78 55 70 11 377 60.73 3.82 55 70 Age Marital status Married or in a couple 10 583 0.72 0.45 0 11 377 0.81 0.39 0 10 583 0.35 0 11 377 0.10 0.30 0 Divorced 0.14 1 1 10 583 0.07 0.26 11 377 0 Widowed 0 1 0.03 0.16 1 10 583 11 377 0 Not married 0.07 0.25 0 1 0.07 0.25 1 Number of grandchildren 10 583 2.05 2.41 20 11 377 2.23 0 19 0 1.63 Income quintiles 0 10 583 0.15 0.35 0 0.14 0.34 11 377 2 10 583 0.16 0.37 0 11 377 0.13 0.34 0 3 10 583 0.20 0.40 11 377 0.18 0.38 0 0 4 10 583 11 377 0 0.230.42 0 0.25 0.43 10 583 0.25 0.44 0 11 377 0.30 0.46 0 Health index 10 583 11 377 63.79 24.10 100 59.63 26.44 100

Table II. Summary statistics, by gender

large, these figures indicate that being retired is associated with a lower level of depression (we limit this observation to the age range 57–65 years, which is when most retirement occurs in our data).

The first model we estimate is the following:

$$y_{ijt} = \beta_{RET} D_{ijt}^{RET} + X'_{ijt} \beta_X + W'_{jt} \beta_W + \vartheta_t + d_i + u_{ijt}$$
(1)

The dependent variable y_{ijt} is the EURO-D depression score for individual i living in region j in wave t; the main explanatory variable is the retirement status D_{ijt}^{RET} , a dummy variable taking the value 1 if the individual reports being retired at the time of the interview and 0 if in the labour force.

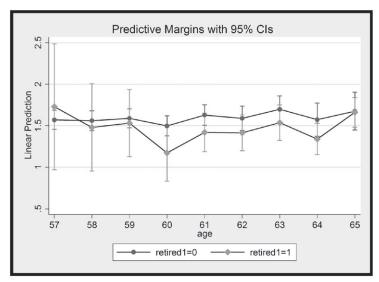
A panel dataset allows us to control for unobservable time-invariant characteristics affecting both the individual retirement decision and mental health by including individual FE d_i in all our specifications. The results obtained using a within estimator will, however, be unbiased only if D_{ijt}^{RET} is orthogonal to the remaining time-varying residual term u_{ijt} and its leads and lags. It is therefore important to control for potential time-varying observable confounders. In all specifications, X_{ijt} includes a second-order polynomial in age, that is, the effect of retirement is identified by changes in EURO-D at the specific retirement age, conditional on a long-term quadratic relation between mental health and age. The term X_{ijt} also includes detailed marital status dummies (widow, divorced, not married until the year of the interview, married or cohabiting), the number of grandchildren, quintiles of household income and an aggregated physical health index constructed following Poterba *et al.* (2011). Finally, W_{jt} includes gross domestic product (GDP) and unemployment rate of region j (NUTS 1 level) at time t: time-varying local labour market conditions may explain variation in depression scores at aggregate level. Finally, following Lindeboom *et al.* (2002), we include in the model a full set of wave dummies ϑ_t to account for any possible time-variant shock to mental health, which is common to all individuals.

Still, it is possible that unobservable transitory shocks in the idiosyncratic time-varying residual u_{ijt} affect both the decision to retire and mental health. This type of endogeneity can be accounted for with an IV

⁴We test the sensitivity of our estimates to the particular age polynomial included in the regressions. We experimented with both a cubic and a quartic specification in age. Coefficient estimates of being retired are almost unaffected, while coefficients for higher than second-order polynomials are never significant (Table A4 in the supporting information).

Note that SHARE respondents were asked about their household's gross incomes in the first wave and about net incomes later. Therefore, we have to resort to a relative measure of income rather than an absolute one to use all the available waves (e.g. Kalwij *et al.*, 2014).

⁶Details about the construction of the health index can be found in the supporting information of this paper.



Notes: This figure shows the linear predictions from the FE models where the EURO-D score is explained by a full set of age dummies interacted with the dummy retired. Standard errors are computed using the delta method.

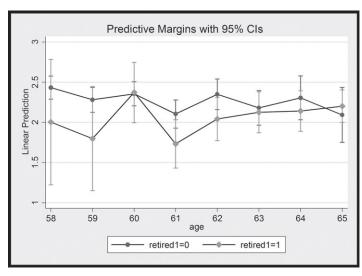
Figure 1. EURO-D predictive margins with 95% confidence intervals (CI), men; FE

approach: we need a set of variables Z_{ijt} that affect mental health only through their effect on the retirement decision D_{ijt}^{RET} . We follow Coe and Zamarro (2011) and use cross-country variation in the rules determining eligibility to Social Security benefits as an instrument. More specifically, we use the statutory and early retirement ages from the Mutual Information System on Social Protection database⁷ as instruments for the retirement decision. The first (second) instrument for the retirement status takes the value 1 if the respondent has reached the standard (early) retirement age at the time of the interview and 0 otherwise. The identifying assumption is that being age eligible for statutory and early retirement pension benefits does not affect mental health directly⁸ but provides incentives to retire, as can be seen in Figures 3 and 4 (for men and women, respectively). These figures report, for each country and by gender, the retirement age distribution for our estimation sample, together with statutory old age and early retirement ages. Retirement age is computed exploiting information on the self-reported year of retirement. There is considerable variation in retirement age; however, most of the countries have clear spikes at legal retirement ages. Our identification strategy does not only rely on changes in retirement rules over time (Figures 3 and 4) but, rather, on the discontinuity in the number of retired individuals at the legal retirement ages, conditional on a smooth function of age.

An open question is, nonetheless, what the underlying mechanism is that governs the relation between the retirement decision and mental health. The availability of a panel dataset covering periods before and after

⁷The Mutual Information System on Social Protection collects information on social protection for the Member States of the European Union and other countries, including Switzerland (http://www.missoc.org/MISSOC/INFORMATIONBASE/COMPARATIVETABLES/MISSOCDATABASE/comparativeTableSearch.jsp).

⁸It should be noted that the exclusion restrictions could potentially be violated because of justification bias and the use of subjective questions to evaluate mental health. In fact, individuals who are retired before the eligibility age of retirement may want to justify their non-working status by pretending that they are in poor health. Once they reach the age of eligibility for retirement, they may have less pressure to justify their non-working status. As a result, being eligible for retirement benefits might affect the dependent variable, conditional on retirement status. However, because EURO-D is a standardised, validated and widely used measure of depressive symptoms (based on a battery of 12 questions rather than on a single self-reported question), the bias due to subjective differences in self-assessment should be limited.



Notes: This figure shows the linear predictions from the FE models where EURO-D score is explained by a full set of age dummies interacted with the dummy retired. Standard errors are computed using the delta method.

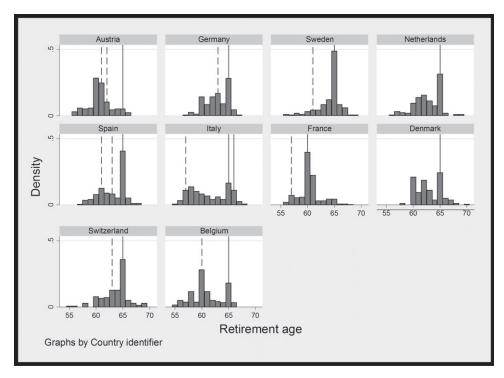
Figure 2. EURO-D predictive margins with 95% confidence intervals (CI), women; FE

the peak of the Great Recession in 2008 and regions differently hit by the crisis helps shed light on this mechanism. An FE estimation allows us to control for any unobservable time-invariant individual characteristic. Therefore, the type of time-varying confounder inducing the unobservable transitory shock we deal with in the IV approach is a sudden change in the environment of the respondent, which affects both labour market participation decisions and mental health. The economic crisis and the corresponding changes in the working environment faced by individuals are clearly potential sources of this type of shock. Worsened economic prospects for a region are likely to increase work-related stress through at least two channels: first, working in a region where economic prospects are bad increases the risk of being laid off (Benitez-Silva et al., 2011; Eurofund, 2013). Second, most employers retrenched substantially as a consequence of the crisis, reducing monetary and non-monetary rewards associated with working activities. An increased level of stress at work can induce individuals to anticipate retirement: leaving the labour force is likely to be perceived as a relief. Lupien et al. (2009), in a review of the literature on the physiological link between stress and brain disorders, report that even a single period of severe stress can lead to memory dysfunction, depression and post-traumatic stress disorder. The data allow us to partially test whether the reduced stress channel is responsible for the mental health improvement at retirement: we first construct a binary indicator D_{it}^{HIT} that takes the value 1 if a given European region j in a given year t was severely hit by the economic crisis and 0 otherwise, and then we estimate the following model:

$$y_{ijt} = \beta_{RET} D_{ijt}^{RET} + \gamma D_{ijt}^{RET} D_{jt}^{HIT} + \beta_{HIT} D_{jt}^{HIT} + \boldsymbol{X}'_{ijt} \boldsymbol{\beta}_{X} + \boldsymbol{W}'_{jt} \boldsymbol{\beta}_{W} + \vartheta_{t} + d_{i} + u_{ijt}$$
(2)

where β_{HIT} captures the effect on mental health of living in a region-year severely hit by the economic crisis and γ accounts for the differential effect of retiring in such economic circumstances.

The crisis indicator D_{jt}^{HIT} is obtained starting from the regional unemployment rate time series (Eurostat, 2015). We apply the Hodrick and Prescott (1997) filter with a smoothing parameter of 100 to each of these time series and split the unemployment rate into trend and cycle components. Figure 5 shows the unemployment rate cyclical component from the Hodrick–Prescott filter in our sample period (2004–2013). Our binary indicator D_{jt}^{HIT} identifies severe shocks in economic conditions by taking on the value one if the cycle component is



Notes: In this figure, a solid line represents old age retirement age(s) and a dashed line early retirement age(s). Early retirement conditions have been tightened dramatically in Italy, for which we only report the earliest retirement age.

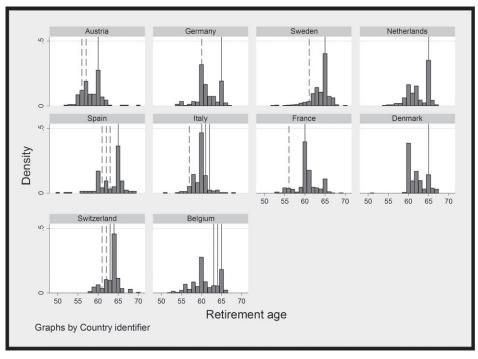
Figure 3. Retirement age distribution, old age and early retirement eligibility rules: 2004–2013, men

negative and greater than one standard deviation. As stated, we assume that the economic crisis affects the relationship between retirement and depression through its effect on working conditions close to retirement. Therefore, we attribute the value of our indicator D_{jt}^{HIT} to each individual according to the individual's self-reported retirement year. In Section 4, we experiment with different indicators of the severity of the crisis and find similar results.

As for Equation 1, Equation 2 is also estimated with both FE and IV-FE estimators. In the latter case, we use four instruments: the already described statutory and early retirement age eligibility dummies and their interaction with the crisis indicator D_{jt}^{HIT} . Both equations are estimated separately by gender to account for potential differences due to different reservation wages and labour supply elasticities between men and women.

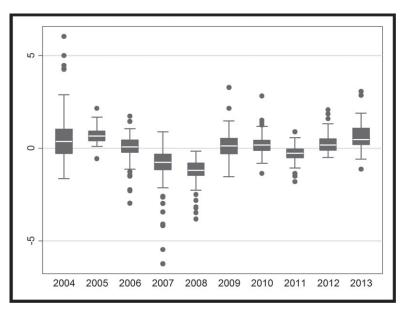
3. RESULTS

Table III reports estimation results for Equation 1, by gender. Column 1 shows FE estimates for men: moving into retirement leads to a significant reduction of 0.203 in depression scores, a 13% reduction compared with its mean value (equal to 1.55, Table II). Column 2 reports IV-FE estimates for men. Instruments are informative and valid: the *F*-test of joint significance of the excluded instruments (i.e. having reached statutory and early retirement age) in the first stage is highly significant, and the Hansen *J*-test shows that the over-identification restriction is valid. The coefficient of the *retired* dummy is no longer statistically significant. Despite the



Notes: In this figure, a solid line represents old age retirement age(s) and a dashed line early retirement age(s). Early retirement conditions have been tightened dramatically in Italy, for which we only report the earliest retirement age.

Figure 4. Retirement age distribution, old age and early retirement eligibility rules: 2004–2013, women



Source: Our computations on Eurostat (2015) regional data on unemployment rates.

Figure 5. Unemployment rate cyclical component of the Hodrick-Prescott filter, 2004-2013

Table III. Number of depression symptoms and retirement

1 abic 11	III. Ivaliber of depression symptoms and retirement				
	(1)	(2)	(3)	(4)	
	FE	IV-FE	FE	IV-FE	
	M	len	Wo	men	
Retired	-0.203*** (0.062)	-0.181 (0.312)	-0.240*** (0.082)	0.136 (0.264)	
Age	-0.109(0.126)	-0.099(0.201)	-0.377**(0.164)	-0.189(0.207)	
Age2	0.015 (0.009)	0.014 (0.016)	0.027** (0.011)	0.010 (0.017)	
Marital status: divorced	0.107 (0.221)	0.108 (0.218)	0.224 (0.245)	0.248 (0.245)	
Marital status: widowed	1.249*** (0.229)	1.249*** (0.227)	0.838*** (0.232)	0.835*** (0.231)	
Marital status: not married	-0.298 (0.354)	-0.300 (0.354)	-0.003 (0.433)	0.037 (0.378)	
No. of grandchildren	-0.020(0.016)	-0.019(0.016)	0.020 (0.020)	0.020 (0.020)	
Household income quintile: 2	-0.110*(0.064)	-0.110*(0.063)	-0.015(0.087)	-0.015 (0.086)	
Household income quintile: 3	-0.049(0.064)	-0.049 (0.063)	0.108 (0.082)	0.111 (0.082)	
Household income quintile: 4	0.012 (0.050)	0.012 (0.050)	0.111 (0.083)	0.122 (0.081)	
Household income quintile: 5	0.042 (0.064)	0.043 (0.064)	0.181** (0.080)	0.181** (0.078)	
Health index	-0.016***(0.001)	-0.016***(0.001)	-0.014***(0.001)	-0.014***(0.001)	
Regional unemployment rate	-0.002(0.012)	-0.002(0.013)	-0.026 (0.022)	-0.012 (0.023)	
Log (regional real GDP per capita)	1.077* (0.641)	1.122 (0.859)	-0.796 (1.200)	0.329 (1.384)	
Wave 2	-0.233(0.178)	-0.239(0.188)	0.109 (0.176)	0.010 (0.180)	
Wave 3	-0.400(0.426)	-0.413(0.445)	0.471 (0.451)	0.325 (0.458)	
Wave 4	-0.608 (0.545)	$-0.622 \ (0.560)$	0.375 (0.572)	0.216 (0.581)	
First stage					
Normal retirement age		0.234*** (0.026)		0.259*** (0.031)	
Early retirement age		0.023 (0.030)		0.017 (0.026)	
Weak identification: F-test of excluded		153.54***		255.93***	
instruments	44.055	44.055	10.500	10.500	
Observations	11 377	11 377	10 583	10 583	
Number of IDs	4461	4461	4150	4150	
Hansen <i>J</i> -test statistic		1.809		1.809	
<i>p</i> -value		0.1786		0.1786	
Durbin–Wu–Hausman test: <i>p</i> -value		0.883		0.225	

This table shows fixed effects (FE) (columns 1 and 3) and instrumental variables fixed-effects (IV-FE) estimates (columns 2 and 4) for the number of depression symptoms. The set of instruments includes the statutory normal and early retirement ages. The omitted categories are 'married or in a couple', being interviewed in the first wave and the first quintile of the household income. Standard errors (clustered by regions – NUTS 1) are in parentheses.

Durbin-Wu-Hausman test not providing evidence of endogeneity of the retirement dummy, we do not think the IV-FE estimates can simply be dismissed as inefficient. First, there are good economic reasons to think that reverse causality could be an issue. Second, the lack of significance may hide heterogeneous effects.

Magnitude and significance of control variables are comparable between columns 1 and 2: being widowed increases depression scores, while the health index is negative and highly significant. We were concerned about the possible endogeneity of the health index. We therefore estimate a model without this variable among the explanatory variables and find that the coefficients of the variables of interest are essentially unchanged. Results for women, reported respectively in columns 3 and 4, are in line with those for men. An exception is that, for them, being in the highest household income quintile is associated with higher depression scores.

The IV-FE estimates account for unobservable transitory shocks affecting both retirement decisions and mental health. Between 2004 and 2013, a likely transitory unobservable shock to European men and women close to retirement has been a worsening of working conditions due to the economic crisis. As we explained in the previous section, the increased stress associated with worse working conditions can induce those who retire to feel relieved and experience a reduction in depression score; in other words, job-related stress can

^{***}p < 0.01.

^{**}p < 0.05.

^{*}p < 0.1.

be the driving force behind the relation between retirement and depression. If this is true, IV-FE estimates in Table III do not capture an important source of heterogeneity: the effect of retirement should be stronger in regions that experienced a more pronounced slowdown during recent years.

Table IV reports estimation results for Equation 2 for men (top panel) and women (bottom panel). In comparison with Equation 1, we additionally include a dummy variable that takes the value 1 if an individual experienced a particularly bad economic slowdown in a given year and 0 otherwise (hit by the crisis) and its interaction with the retirement dummy (retired × hit by the crisis). Column 1 reports the IV-FE results for the full sample: living in a region and year particularly hit by the crisis significantly increases depression scores for men. As we anticipated, the non-significant effect of retiring we found in Table III hides important heterogeneity: the coefficient of the interaction term is negative and significant. This means that those who retire in a region and year not considerably hit by the crisis do not experience any significant reduction on mental health, while those who retire in a year and region severely hit by the crisis do experience such a reduction. The magnitude of the differential effect for those retiring when severely hit is a reduction in depression scores of 0.43 EURO-D points, which accounts for an approximately 27% reduction with respect to the mean value. For women, the crisis plays no role: results of Table III are confirmed, and retirement does not significantly affect their mental health.

Distinguishing between blue-collar and white-collar workers (columns 2 and 3 of Table IV), we find that both the negative effect of experiencing an economic crisis and the positive effect of retirement on men's mental health in the region-year hit by the economic crisis outlined in column 1 of Table IV are driven by blue-collar workers. For female blue-collar workers, experiencing a severe crisis increases depression score, but retiring has no relieving effect. No significant results are found for female white-collar workers, nor for women overall (column 1; note that more than 80% of sampled women work(ed) in white-collar occupations).

The diagnostics reported in Table IV again point to the validity of the chosen instruments for both men and women, whereas the *retired* regressor no longer passes the exogeneity test for women. ¹⁰

These results are in line with the evidence showing that job insecurity increased considerably during the crisis (Eurofund, 2013) and that the extent of such increase varied by occupations. In fact, looking at aggregate figures from the 2005 and 2010 waves of the European Working Conditions Surveys (EWCS), ¹¹ we find that perceived chance of losing one's job within the next 6 months is very heterogeneous across occupations, increasing by 27% for blue-collar workers and by 17% for white-collar workers. Moreover, Eurofund (2013) reports that the recent economic downturn affected other dimensions of working life, leading to less choice for workers, wage freezes and wage cuts, greater work intensity, deterioration of work–life balance and greater risk of harassment/bullying. All these factors affect workers' level of stress and are likely to be particularly important for less-qualified workers, consistent with the results of our estimates.

4. ROBUSTNESS CHECKS

A critical element of our empirical strategy is the type of transition to retirement analysed and the corresponding definition of the dummy *retired*. As explained in Section 2, we defined *retired* as a dummy taking the value 0 if the individual reports being in the labour force at the time of the interview and one if reports being retired. We have therefore considered two alternative dummies, based on individuals' status when in the labour force. In particular, we first excluded those who reported being unemployed and defined the variable *retired* equal to 1 if the individual had retired and 0 if the individual reported *working*. Second, we defined a corresponding

⁹The dummy D_{jl}^{HIT} varies by year of retirement and region. We do not have enough heterogeneity in the data to estimate specifications of Equation 2 that include also regional unemployment rate and GDP per capita.

 ¹⁰Because, in this case, we have multiple endogenous variables, the F-statistic is computed according to Sanderson and Windmeijer (2013).
 ¹¹The EWCS are cross-country surveys that assess and quantify the working conditions of both employees and the self-employed across Europe on a harmonised basis. More details about the EWCS and our elaborations can be found in the supporting information (Figure A1).

M. BELLONI *ET AL*.

Table IV. Number of depression symptoms and retirement in economic crisis specifications

	(1)	(2)	(3)	
Variables	All sample	Blue-collar	White-collar	
		Men		
Retired	-0.113(0.294)	-0.534(0.413)	0.0892 (0.373)	
Retired × hit by crisis	-0.426**(0.184)	-0.558**(0.241)	-0.191 (0.471)	
Hit by the crisis	0.224*** (0.0781)	0.419*** (0.0923)	0.138 (0.131)	
Observations	11 377	3399	7212	
Number of IDs	4461	1371	2805	
Sargan–Hansen statistic (p-value)	4.708 (0.095)	0.693 (0.707)	2.021 (0.364)	
Weak identification: Sanderson-Windmeije	er F-statistic			
Retired	58.11***	33.47***	26.06***	
Retired × hit by the crisis	104.88***	221.06***	31.00***	
Durbin–Wu–Hausman test: p-value	0.6901	0.1393	0.5705	
		Women		
Retired	0.175 (0.229)	-0.0530 (0.784)	0.158 (0.285)	
Retired × hit by the crisis	-0.338(0.382)	-1.094(0.768)	-0.279(0.468)	
Hit by the crisis	0.0617 (0.0973)	0.558*** (0.198)	-0.0498 (0.0856)	
Observations	10 583	1691	8064	
Number of IDs	4150	667	3150	
Sargan–Hansen statistic (p-value)	1.166 (0.558)	2.578 (0.275)	0.007 (0.996)	
Weak identification: Sanderson-Windmeije	er F-statistic			
Retired	32.23***	17.86***	32.28***	
Retired × hit by the crisis	53.45***	29.00***	66.60***	
Durbin–Wu–Hausman test: p-value	0.2096	0.0209	0.3327	

This table reports the instrumental variables fixed-effects estimates in an economic crisis specification for the overall sample (column 1) and for the blue-collar subsample (column 2) and white-collar subsample (column 3) for men (top panel) and women (bottom panel). The dummy hit by the crisis takes the value 1 if the cyclical component of the Hodrick-Prescott filter applied to the unemployment rate series of the period 2004–2013 is at least one standard deviation above zero and 0 otherwise. The set of instruments includes the statutory normal and early retirement ages and their interaction with the dummy hit by the crisis. All specifications include the following additional covariates: second-degree polynomial of age; dummy variables for marital status, income quintile and wave; the number of grandchildren; and the health index. Standard errors (clustered by regions – NUTS 1) are in parentheses.

dummy *retired* that considers only those who were unemployed among those in the labour force. Table V reports the results of this analysis. Our main results hold in the first case (*retirement from work*) but no longer do in the second case (*retirement from unemployment*). This evidence reinforces our hypothesis that the channel through which retirement reduces depression scores is by alleviating job-related stress.

A second key element of our analysis is the definition of the economic crisis, based on the *binary* indicator D_{jt}^{HIT} obtained by detrending the time series of the regional unemployment rate. In Table VI, we report the results of a sensitivity analysis with respect to the crisis definition (only for men, IV-FE estimates). We first define a *continuous* indicator of the severity of the crisis based on the same detrended macroeconomic variable (see column 1 for the whole sample and column 2 for blue-collar workers). Figure 6 shows the deriving marginal effect of retirement on the depression score for male blue-collar workers as a function of the cyclical component of the unemployment rate: retirement significantly reduces depression scores when economic conditions are very bad, namely, above the 80th percentile of the distribution of the indicator. Different values of the Hodrick–Prescott filter yield very similar results. We then define the crisis by applying the same detrending method to another macroeconomic indicator: the regional real GDP per capita. ¹² We define the crisis by means

Health Econ. **25**(Suppl. 2): 126–140 (2016) DOI: 10.1002/hec

^{***}p < 0.01.

p < 0.05. p < 0.1.

¹²Eurostat provides data on nominal GDP per capita by NUTS 1 region. We compute the real GDP per capita by dividing the nominal regional data by the national price index (GDP deflator with the base year 2010).

Table V. Number of depression symptoms and retirement in economic crisis specifications: robustness checks for alternative definitions of retirement dummy

	(1)	(2)	(3)	(4)
	Retirement from work		Retirement from unemployment	
	Men	Women	Men	Women
Retired	0.150 (0.324)	0.293 (0.236)	0.114 (0.680)	0.535 (0.474)
Retired × hit by crisis	-0.483** (0.206)	-0.126(0.472)	1.146 (0.851)	0.035 (1.402)
Hit by the crisis	0.178*** (0.069)	0.035 (0.095)	-0.291 (0.385)	0.273 (0.452)
Observations	10 344	9613	3027	3299
Number of ID	4070	3795	1324	1412
Sargan-Hansen statistic (p-value)	4.370 (0.112)	0.731 (0.694)	1.925 (0.382)	3.459 (0.177)
Weak identification: Sanderson-Windr	neijer F-statistic			
Retired	52.97***	33.22***	10.80***	18.95***
Retired × hit by the crisis	100.75***	45.39***	25.33***	4.94***

This table reports the instrumental variable fixed-effect estimates in an economic crisis specification for the overall sample for men (columns 1 and 3) and women (columns 2 and 4). The dummy hit by the crisis takes the value 1 if the cyclical component of the Hodrick–Prescott filter applied to the unemployment rates of the period 2004–2013 is at least one standard deviation above zero and 0 otherwise. The set of instruments includes the statutory normal and early retirement ages and their interaction with the dummy hit by the crisis. All specifications include the following additional covariates: second-degree polynomial of age; dummy variables for marital status, income quintile and wave; the number of grandchildren; and the health index. Standard errors (clustered by regions – NUTS 1) are in parentheses. ***p < 0.01.

Table VI. Number of depression symptoms and retirement in economic crisis specifications – Alternative crisis indicator – instrumental variable fixed-effects estimates, men

	Cycle component of unemployment rate		Real GDP per capita (dummy = 1 if hit)		
Crisis indicator	Whole sample	Blue-collar	Whole sample	Blue-collar	
Retired	-0.131 (0.297)	-0.553 (0.407)	-0.0162 (0.298)	-0.260 (0.445)	
Retired × crisis indicator	-0.141**(0.0621)	-0.224* (0.119)	-0.324***(0.0945)	-0.624**(0.253)	
Hit by the crisis	0.0357* (0.0185)	0.0356 (0.0289)	0.00558 (0.0745)	0.0406 (0.142)	
Observations	11 377	3399	11 377	3399	
Number of ID	4461	1371	4461	1371	

Robust standard errors in parentheses.

of a binary indicator, equal to 1 if the cycle component is negative. Results are reported in columns 3 and 4 for the whole sample and for blue-collar workers, respectively. The coefficients of interest are essentially unchanged, thus confirming the robustness of our findings to alternative definitions of the crisis. Our preferred macroeconomic indicator of the crisis remains, however, the unemployment rate: the unemployment rate peaks only after the worst point of the business cycle (Stock and Watson, 1999) because individuals and firms do not adjust immediately to changes in GDP and the effects on workers' environment might occur with a lag. As a result, unemployment rate is likely to better reflect working conditions.

Finally, we tested whether the results are sensitive to the estimation method. The IV-FE method requires the instruments to be strictly exogenous, that is, independence of the contemporaneous error term as well as all its lags and leads. We re-estimated the model with an IV first differences (IV-FD) estimator that requires only weak exogeneity (independence of the contemporaneous error term and its leads but not its lags). The results are reported in columns 1 and 2 of Table VII for men and women, respectively, and are very similar to the IV-FE estimates (although less precisely estimated because of sample reduction). Until now, we always ran

^{**}p < 0.05.

^{*}p < 0.1.

^{***}p < 0.01.

^{**}p < 0.05.

^{*}p < 0.1.

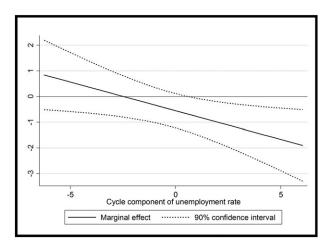


Figure 6. Marginal effect of retirement on the depression score as a function of the cyclical component of the regional unemployment rate

Table VII. Number of depression symptoms and retirement in economic crisis specifications: robustness checks for alternative estimation methods

	(1)	(2)	(3)	(4)	(5)	(6)
	IV-FD		IV-RE		IV least squares	
	Men	Women	Men	Women	Men	Women
Retired	-0.214 (0.314)	0.171 (0.263)	0.542*** (0.139)	0.475*** (0.113)	0.970*** (0.135)	0.615*** (0.107)
Retired × hit by crisis	-0.369 (0.244)	0.617 (0.517)	-0.245* (0.141)	0.227 (0.205)	-0.255* (0.134)	0.265 (0.190)
Hit by the crisis	0.200* (0.103)	-0.072 (0.122)	0.164*** (0.055)	-0.016 (0.070)	0.192*** (0.061)	-0.033 (0.076)
Observations	6488	6078	20 380	19 343	20 380	19 343
Number of IDs	4240	3982	11 841	11 166	11 841	11 166

IV-FD, instrumental variables first differences; IV-RE, IV random effects.

the IV-FE model under the assumption that some of the explanatory variables can be correlated with unobservable time-invariant individual characteristics. However, if we are willing to assume conditional mean independence between the time-invariant component of the error term and the included regressors, the IV-FE and IV-FD estimators are less efficient than an IV random-effects (IV-RE) estimator. Moreover, under the conditional mean independence assumption, the IV least squares estimator is also consistent and requires only contemporaneous exogeneity for the instruments rather than strict exogeneity, as the IV-RE estimator does. Columns 3 and 4 of Table VII report IV-RE estimates and columns 5 and 6 IV least squares estimates. The interaction term of interest in the IV-RE estimates is in line with that of the IV-FE and IV-FD, while it loses statistical significance in the linear regression. In the results of Table VII, the coefficient of the retirement dummy becomes significant in both the IV-RE and linear IV regressions. This positive association disappears with the IV-FE or IV-FD, thus suggesting that there are unobserved time-invariant characteristics that are correlated with both the instruments and the dependent variables. The use of an FE model strengthens the assumption of independence between the instruments and the error term of the main equation.

^{***}p < 0.01.

^{**}p < 0.05.

^{*}p < 0.1.

5. DISCUSSION AND CONCLUSION

This paper studied the causal effect on mental health of retiring during the economic crisis. We addressed the potential endogeneity of the retirement decision by applying an IV-FE approach using country-specific and gender-specific statutory and early retirement ages as instruments for retirement behaviour. We found that retirement per se does not have a significant impact on depression scores, once endogeneity is taken into account. However, by exploiting time and geographical heterogeneity in the intensity of the economic crisis, we showed that retirement does improve mental health in periods and regions severely hit by the economic crisis. Moreover, our results indicated that this effect is entirely due to blue-collar (ex)workers and does not apply to white-collar workers.

Our results help shed light on the mechanisms behind the relationship between retirement and mental health. We suggest that retirement may affect mental health through its effect on stress. If retirement is perceived as a relief from job-related stress, our finding of a differential effect of retirement according to the type of occupation is entirely in line with the worsening of working conditions experienced in particular by blue-collar workers as a consequence of the economic downturn.

The natural implication of our result is that policymakers willing to postpone the retirement age should account for the fact that this may increase health inequalities, because the implied costs in terms of worsening mental health would disproportionately hit low-skilled workers.

CONFLICT OF INTEREST

The authors state that there are no financial or personal relationships between themselves and others that might lead to a conflict of interest.

ACKNOWLEDGEMENTS

We thank Pilar García Gómez, Sergi Jimenez Martin, José María Labeaga Azcona, and two anonymous referees for comments that significantly improved the paper. We are grateful to Liudmila Antonova, Peter Eibich, Eric Bonsang, Francesco Moscone and participants at the Madrid Workshop on the Economic Consequences of the Economic Crisis on Health and Health Care as well as the 2016 Netspar Pension Workshop in Leiden for useful comments. This paper uses data from SHARE Wave 5 release 1.0.0, as of 31 March 2015 (DOI 10.6103/ SHARE.w5.100), SHARE Wave 4 release 1.1.1, as of 28 March 2013 (DOI 10.6103/SHARE.w4.111), SHARE Waves 1 and 2 release 2.6.0, as of 29 November 2013 (DOI 10.6103/SHARE.w1.260 and 10.6103/ SHARE.w2.260). SHARE data collection was primarily funded by the European Commission through the Fifth Framework Programme (project QLK6-CT-2001-00360 in the thematic programme Quality of Life), the Sixth Framework Programme (projects SHARE-I3, RII-CT-2006-062193, COMPARE, CIT5-CT-2005-028857 and SHARELIFE, CIT4-CT-2006-028812) and the Seventh Framework Programme (SHARE-PREP, no. 211909, SHARE-LEAP, no. 227822, and SHARE M4, no. 261982). Additional funding from the US National Institute on Aging (U01 AG09740-13S2, P01 AG005842, P01 AG08291, P30 AG12815, R21 AG025169, Y1-AG-4553-01, IAG BSR06-11 and OGHA 04-064) and the German Ministry of Education and Research as well as from various national sources is gratefully acknowledged (see www.share-project.org for a full list of funding institutions). Michele Belloni is also affiliated with CeRP-Collegio Carlo Alberto.

REFERENCES

Avendano M, Berkman L. 2015. In *Labour Markets, Employment Policies and Health in Social Epidemiology*, Berkman L, Kawachi I, Glymour MM (eds.), Oxford University Press: Oxford, UK. Behncke S. 2012. Does retirement trigger ill health? *Health Economics* **21**(3): 1050–1099.

- 1099105, 2016, SZ, Downloaded from https://olinheibbrary.wiley.com/doi/10.1002/hec.3377 by Fuchbochschule Nordwesschweiz FHNW, Wiley Online Library on [2010/2024]. See the Terms and Conditions (https://onlineibbrary.wiley.com/terms-and-conditions) on Wiley Online Library for rules of use; OA articles are governed by the applicable Centitive Commons Licensen
- Benitez-Silva H, Garcia-Pérez JI, Jiménez-Martin S. 2011. The effects of employment uncertainty and wealth shocks on the labor supply and claiming behavior of older American workers. Working Paper 564, Barcelona Graduate School of Economics.
- Bonsang E, Adam S, Perelman S. 2012. Does retirement affect cognitive functioning? *Journal of Health Economics* **31**(3): 490–501.
- Charles KK. 2004. Is retirement depressing? Labor force inactivity and psychological well-being in later life. In *Accounting* for Worker Well-being, Polachek SW (ed.), Research in Labor Economics, vol. 23. Elsevier: Amsterdam; 269–299.
- Coe NB, Zamarro G. 2011. Retirement effects on health in Europe. Journal of Health Economics 30: 77-86.
- Dave D, Rashad I, Spasojevic J. 2008. The effects of retirement on physical and mental health outcomes. *Southern Economic Journal* **75**(2): 497–523.
- De Grip A, Lindeboom M, Montizaan R. 2012. Shattered dreams: the effects of changing the pension system late in the game. *Economic Journal* **122**: 1–24.
- Eibich P. 2015. Understanding the effect of retirement on health: mechanisms and heterogeneity. *Journal of Health Economics* **43**(1): 1–12.
- Eurofund. 2013. Impact of the crisis on working conditions in Europe. Eurofund (European Foundation for the Improvement of Living and Working Conditions) report. (Available from: http://www.eurofound.europa.eu/sites/default/files/ef_files/docs/ewco/tn1212025s/ tn1212025s.pdf) [Accessed May 2015].
- Eurostat. 2015. Regional economic accounts. (Available from: http://ec.europa.eu/eurostat/web/regions/data/database) [Accessed 6 July 2015].
- Gorry A, Gorry D, Slavov S. 2015. Does retirement improve health and life satisfaction? NBER Working Paper No. 21326. Greenberg PE, Kessler RC, Birnbaum HG, Leong SA, Lowe SW, Berglund PA, Corey-Lisle PK. 2003. The economic burden of depression in the United States: how did it change between 1990 and 2000? *Journal of Clinical Psychiatry* 64(12): 1465–1475.
- Hodrick RJ, Prescott EC. 1997. Postwar U.S. business cycles: an empirical investigation. *Journal of Money, Credit, and Banking* **29**: 1–16.
- Jimenez-Martin S, Labeaga Azcona JM, Martínez-Granado M. 1999. Health status and retirement decisions for older European couples. SSRN paper 207188.
- Johnston DW, Lee WS. 2009. Retiring to the good life? The short-term effects of retirement on health. *Economics Letters* **103**(1): 8–11.
- Jokela M, Hintsa T, Hintsanen M, Keltikangas-Järvinen L. 2010. Adult temperament and childbearing over the life course. European Journal of Personality 24: 151–166.
- Kalwij A, Pasini G, Wu M. 2014. Home care for the elderly: the role of relatives, friends and neighbors. Review of Economics of the Household 12: 379–404.
- Lindeboom M, Portrait F, van den Berg J. 2002. An econometric analysis of the mental-health effects of major events in the life of older individuals. *Health Economics* 11: 505–520.
- Lupien SJ, McEwen BS, Gunnar MR, Heim C. 2009. Effects of stress throughout the lifespan on the brain, behaviour and cognition. *Nature Review of Neuroscience* **10**: 434–445.
- Mein G, Martikainen P, Hemingway H, Stansfeld S, Marmot M. 2003. Is retirement good or bad for mental and physical health functioning? Whitehall II longitudinal study of civil servants. *Journal of Epidemiology and Community Health* 57(1): 46–49.
- Poterba J, Venti S, Wise D. 2011. The composition and drawdown of wealth in retirement. *Journal of Economic Perspectives* 25(4): 95–118.
- Prince MJ, Reischies F, Beekman AT, Fuhrer R, Jonker C, Kivela SL, et al. 1999. Development of the EURO-D scale a European Union initiative to compare symptoms of depression in 14 European centres. *British Journal of Psychiatry* **174**: 330–338.
- Sanderson E, Windmeijer F. 2013. A weak instrument *F*-test in linear IV models with multiple endogenous variables. Centre for Microdata Methods and Practice working paper CWP58/13.
- Sobocki P, Jönsson B, Angst J, Rehnberg C. 2006. Cost of depression in Europe. *Journal of Mental Health Policy and Economics* **9**(2): 87–98.
- Stock JH, Watson MW. 1999. Business cycle fluctuations in US macroeconomic time series. *Handbook of Macroeconomics* 1: 3–64.

SUPPORTING INFORMATION

Additional supporting information may be found in the online version of this article at the publisher's website.

Health Econ. **25**(Suppl. 2): 126–140 (2016) DOI: 10.1002/hec