Towards making Ireland the best place in the world to grow old



The Impact of Voluntary & Involuntary Retirement on Mental Health: Evidence from Older Irish Adults

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Irene Mosca and Alan Barrett



Postponement of retirement to counteract effects of population ageing

Larger tax base

Pension benefits paid later in life

But what about individual wellbeing?



A priori, retirement can affect mental health:

- Negatively if perceived as:
 - stressful event
 - loss of identity
 - loss of income

- Positively if:
 - relief from job-related stress
 - satisfaction derived from many sources throughout life



Association between retirement & mental health generally negative

- But few studies have attempted to identify causal effects
- Difficult because:
 - Unobserved heterogeneity
 - Unobservables correlated with retirement and mental health
 - Reverse causation
 - Poor mental health after retirement might be the cause, not the effect, of retirement



- Empirical papers have used different strategies:
 - Fixed effect models (Mandal & Roe 2008; Dave et al. 2008; Latif 2013; Charles 2002)
 - Two-stage least square estimation (Charles 2002, Mandal & Roe 2008; Latif 2013; Neuman 2008; Coe & Zamarro 2011)
 - Non-parametric estimators (Behncke 2012)
 - Regression discontinuity design (Johnston & Lee 2009)
- Results are mixed:
 - Negative effect (Mandal & Roe 2008; Dave et al. 2008)
 - Positive effect (Mandal & Roe 2008; Charles 2002; Johnston & Lee 2009)
 - No effect (Coe & Zamarro 2011; Behncke 2012)



We run 2 models where reference category = continuously employed

Model 1:

- continuously employed
- vs retired

Model 2:

- continuously employed
- vs retired voluntarily
- vs retired involuntarily
- vs retired due to own ill health



DEPENDENT VARIABLE

- Change in depression score (CESD)
 - CESD score at Wave 2 CESD score at Wave 1 (e.g. 15-10=5)

INDEPENDENT VARIABLES

- Demographic/social changes
 - Death of child/spouse/parent; loss of close friends or relatives; stopped participating in a group
- Economic changes
 - Retirement; changes in income
- Physical health changes
 - Onset of cardiovascular disorder; onset of chronic illness
 - Loss of functional capacity
 - Deterioration in self-reported physical health
 - Deterioration in self-reported vision

The sample



2,373 individuals in employment at W1





90% still employed at W2

10% have retired, due to: Involuntary exit (N=30) Own ill health (N=22) Voluntary exit (N=192)

Retirees are on average 5 years older than those still at work (average age: 61.7 years vs 56.6 years)



	Continuously	Fully	Retired due	Retired	Retired
	employed	retired	to ill health	involuntarily	voluntarily
Δ in CES-D	-0.378	0.783**	3.041**	1.854*	0.328*
score, mean	-0.576	0.765	3.041	1.634	0.326
N	2,129	244	22	30	192

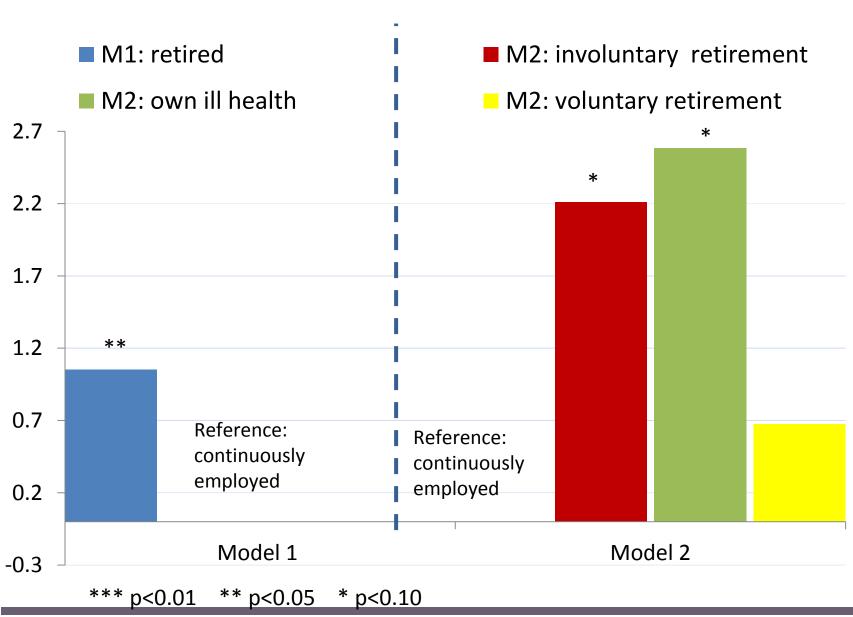


	Continuously employed	Fully retired
Independent variables		
Loss in functional capacity (new ADL)	0.008	0.026*
Onset of hypertension/high chol/diabetes	0.134	0.190**
Onset of chronic illness	0.175	0.258*
Income has decreased	0.407	0.693***
Income has increased/stayed the same	0.461	0.142***

Regression results: coefficients











	Model 1	Model 2
Continuously employed	Ref.	Ref.
Fully retired	1.05**	
Retired involuntarily		2.21*
Retired due to own ill health		2.58*
Retired voluntarily		0.67

	Model 1	Model 2
Death of child/spouse/parent	1.69**	1.68**
Loss in functional capacity (new IADL)	3.63*	3.51*
1 point deterioration in SR health	0.78**	0.78**
2+ point deterioration in SR health	1.60*	1.58**
Deterioration in SR vision	0.60**	0.62**

***1%; **5%; *10%

Conclusions



- We investigated effects of retirement on mental health and found that reason for retirement is important
- Negative effect of retirement for those who retired involuntarily or due to ill health
- No effect for those who retired voluntarily
- Findings particular important in the current economic context
- Important to note that this is a short-run effect. Impact might change in medium to long-run