Mental Retirement and Non-Contributory Pensions

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Abstract

This paper analyses the effects of retirement on cognitive abilities for the elderly poor on the

basis of the "mental retirement" effect that accompanies retirement. Given the recent

emergence and expansion of non-contributory pension programs to alleviate poverty in old-

age across low and middle income countries, attention should be given to the potential

acceleration of cognitive decline when individuals retire, i.e. when there is a decrease in their

engagement of cognitive demanding activities. We use a unique and recent survey of the elderly

poor in Peru (ESBAM), which includes a cognitive test and serves as the baseline for a non-

contributory pension program. The study finds a significant negative effect of retirement on

cognitive ability after controlling for a number of demographics and objective health measures.

This result also hold after dealing with the potential endogeneity of retirement by means of

Instrumental Variables drawn from administrative data that exploits the variation of the

intensity of a non-contributory pension program.

Keywords: cognitive abilities, old-age poverty, retirement, non-contributory pensions, Peru

JEL Classification: H55, J14, J24, J26

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1

1 Introduction

Although cognitive abilities will certainly decline with age, the major event of labour retirement can accelerate this trend. This will occur because the individual is leaving a more cognitive challenging environment, (as work is), to be in a generally less stimulating setting of retirement. This explains the "use it or lose it" hypothesis (Rowe and Kahn, 1998; Schooler, Mulatu and Oates, 1999) in which one must keep an "engaged life style" in order to lessen the decline of cognitive functioning. Therefore, if individuals do not expend time on cognitive maintenance and repairing activities, we will observe a "mental retirement" effect (Rohwedder and Willis, 2010). On the basis of these ideas, a recent strand of the economic literature examines more thoroughly the causal effects of retirement on cognitive abilities (Börsch-Supan, 2013). For example, Rohwedder and Willis (2010), Mazzona and Peracchi (2012), Bingley and Martinello (2013) and Celidoni, Dal Bianco and Weber (2013) exploit country differences on retirement age legislation in the US and Europe as credible instruments to uncover a significant effect of retirement on cognitive functioning. All these studies are based on industrialized countries where social security coverage is extended and therefore retirement regulation can offer a convincing instrument.

The analysis of the "mental retirement" effect is more challenging in the case of less industrialized economies. Generally, in this setting, social security coverage rates are low, individuals tend to keep working at advanced ages or never retire, credit constraints are large and survey data including cognitive skills questions are scarce. However, it is expected that the recent emergence of non-contributory pension programs aimed at alleviating poverty in oldage will induce a significant number of elderly into retirement. For example, De Carvalho-Filho (2008) estimated that about 40 percent of recipients fully retired upon receiving a non-contributory pension in rural Brazil, with the rest of recipients drastically reducing their working hours. In line with the literature on mental retirement, we consider that the

implementation of non-contributory pension programs may accelerate the decline of cognitive abilities of the elderly if these individuals do not maintain an engaged life style after retirement. The introduction of non-contributory pensions is becoming very popular in Latin America. During the last 10 years, 12 countries have implemented such policies (see Table A1 in the Appendix). Although transfer generosity, coverage and access requisites vary widely in the region, we are again witnessing a major shift in the strategy to deal with social protection and poverty in old-age¹.

Cognitive abilities are an indicator of accumulated human capital that depreciates. Therefore, the retirement induced by non-contributory pensions may accelerate this depreciation unless the individual takes enough measures for cognitive maintenance or repairing (McFadden, 2008). This will eventually lead to a faster deterioration of human capital in later life. Elderly individuals with more cognitive impairments are less autonomous and can represent a major public health problem in the context of ageing societies. As reported by Bonsang, Adam and Perelman (2012), cognitive impairment or dementia is associated with lower quality of life, increased disability and higher health expenditures. Moreover, the majority of non-contributory pension recipients live in poor rural areas so it is important to maintain cognitive healthy elderly individuals as they play an important role in transmitting traditions, dialects, customs and community memories.

In this paper we study the effects of retirement on cognitive functioning in a sample of poor Peruvian elderly. Peru has recently implemented a non-contributory pension program that includes a new household survey for 65-80 year old individuals that contains questions on cognitive functioning. The Survey of Health and Wellbeing of the Elderly (ESBAM) is the baseline for *Pension 65*, the non-contributory pension scheme implemented at the end of 2011.

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¹ The structural pension reform of the 90's made pension systems financially sustainable with the implementation of individual capitalization accounts. However, the pension coverage rate remained low, with acute differences between rural and urban areas and among income groups (see Rofman and Oliveri, 2011).

Although this is a cross-section dataset, it contains a large number of retirees and working individuals at later ages, which allow us to observe cognitive differentials between working and non-working persons in later years. This is different from what has been done in industrialized countries where cognitive functioning is hardly observable in working individuals at advanced ages because early and normal retirement occurs mostly at legal ages (mainly between 55 and 65). Additionally, we use administrative data from *Pension 65* and exploit the variation of intensity of the program at district level as a source of exogenous variation, which is expected to affect cognitive functioning only through retirement.

In our empirical strategy we first use OLS estimation to measure the relationship of retirement and cognition. In measuring this relation we depart from previous related literature by controlling the influence of different confounders on cognitive ability, such as schooling, sex, age, household demographics and objective health indicators. This allows us to reduce the potential bias due to omitted variables. Specifically, we use arm-span, which is a better measure than height in old-age population to proxy the nutritional status acquired in childhood that positively affects cognitive ability development (Case and Paxon, 2008; Guven and Lee, 2013a and 2013b). Thus, our paper follows the large body of recent research documenting the importance of accounting for parental inputs (proxied by arm-spam in our case) and schooling at early ages in the formation of cognitive skills (Todd and Wolpin, 2003; Cunha, Heckman, Lochner, Masterov, 2006; Cunha, Heckman and Schennach, 2010; Cunha and Heckman, 2007 and 2008). Moreover, to account for current nutritional status, we use individual altitudecorrected measure of haemoglobin as there is evidence that poor nutritional status is associated to an increase in the risk of dementia (Hong et al., 2013). Diagnosed illnesses related to mental disorders are also controlled for. We also control for observed (extreme poverty rate) and unobserved characteristics (fixed-effects) at the district-level to account for characteristics that might affect cognition.

In order to deal with the potential endogeneity (e.g. reverse causality) of retirement and cognitive functioning, and given the binary nature of the retirement variable, we estimate a Control Function (CF) model (Wooldridge, 2010). As instruments for retirement, we use the number of months since *Pension 65* has been operating in the district of the respondent and the total number of *Pension 65* beneficiaries in the district in October-November 2012, just before the ESBAM data was collected. Both variables are obtained from administrative data of *Pension 65*. We exploit the variation in the timing of implementation of the program across districts and argue that observing a stronger presence of *Pension 65* in the district increases the expectation of an individual to receive the transfer. Therefore, the individual can accelerate the decision of retirement, and only through this channel, affect cognition. We also check the association of retirement and the four component dimensions of our measurement of cognitive functioning.

Our results show that, relatively to those who continue working, retirement has a statistically significant negative effect on cognition (in a range of about -0.14 to -0.16 standard deviations). The size of this effect is about four times larger than the negative effect of age on cognition functioning. The dimensions of cognitive skills that seem to be most affected are *orientation* and *memory*.

The rest of the paper is organized as follows: Section 2 discusses the relation between non-contributory pensions and cognitive functioning. Section 3 presents the dataset and variables considered in the empirical analysis. Section 4 discusses the empirical strategy. Section 5 reports the results and performs some robustness checks. Finally, section 6 concludes.

2 Non-contributory pensions and cognitive functioning

There is a great deal of differences among the new non-contributory pension schemes implemented in Latin America, but it is common to observe that the recipients are mostly

elderly living in poverty and rural areas who were unable to save in the contributory pension scheme. Among the possible causes of why these individuals did not make savings for old-age is that they worked mainly in informal and/or agricultural activities where no contributions are enforced, and their incomes were close to subsistence levels. One of the goals of noncontributory pensions is to allow old-age individuals to finally retire from labour with a secure stream of income instead of continuing to work until very advanced ages or their entire lives. This "Ceaseless Toil" pattern, as noted by Davis-Friedmann (1991) and analysed in Benjamin, Brandt and Jia-Zhueng (2003) to account for labour supply of the elderly in rural China, is commonly observable in less developed countries with low pension coverage.

The introduction of a non-contributory pension program can induce a massive retirement and provoke a faster reduction in the cognitive stock of old-age individuals. For instance, evidence from a non-contributory pension program in rural Brazil suggests that about 40 percent of recipients fully retire from the labour market upon receiving the transfer, with the rest of recipients drastically diminishing their working hours (De Carvalho-Filho, 2008). The effect of retirement on cognitive skills can be particularly important in the rural area. Firstly, there are more pension recipients in rural areas because of higher poverty incidence. Secondly, the educational attainment of rural elderly individuals is lower, so that any effect of retirement on cognitive functioning will start at an already relatively low level of cognition. Moreover, it is important to keep cognitive healthy elderly individuals as they are essential in transmitting traditions, dialects, customs and community memory. In Latin American countries severely hit by political violence (e.g. Guatemala, El Salvador, Colombia and Peru) the oldage members of rural communities are the ones who have helped in recounting events, casualties and location of victims. Even in censuses and other official visits, the elderly are the household members who indicate the family composition and other household variables because prime-age members are frequently working in distant places. Furthermore, having a

good cognitive functioning is important for making better financial decisions and can lessen public expenses in health for the elderly (Lei et al., 2012; Bonsang et al., 2012).

In the case of Peru, *Pension 65* is non-contributory pension scheme implemented in October 2011, which is administrated by the Ministry of Development and Social Inclusion of Peru (MIDIS). The cash transfers of this program are targeted at individuals aged 65 or over who do not receive a contributory pension and live in a household officially classified as extreme poor. The system to assign poverty classifications to the household (non-poor, extreme poor and non-extreme poor) is called SISFOH and is based on an algorithm composed by the weighted sum of different socio-economic variables such as material conditions of household, assets, incomes, education level and access to basic public services. It is worth to note the rapid growth of the program; by the end of 2014, there is a total of 450,000 recipients that represents 14.2 percent of the population aged 65 or over.

3 Data

3.1 The Survey of Health and Wellbeing of the Elderly

The Survey of Health and Wellbeing of the Elderly (ESBAM) is a unique and recent survey collected by the National Institute of Statistics of Peru (INEI) between November and December 2012. It includes a detailed questionnaire for 65-80 year old persons, which collects information about their socio-economic conditions, subjective wellbeing, expectations, beliefs and several subjective and objective health related issues. Furthermore, ESBAM includes socio-economic questions at the household level and for each household member. Detailed questions on expenses and income are also recorded. All information is collected face-to-face by interviewers, while data on anthropological measures, arterial pressure and blood samples are collected by technicians specialized in collecting these measures.

The data was gathered in twelve departments² (half of the total in Peru) where MIDIS had already completed the census of socio-economic variables intended to update its targeting score system SISFOH³. The population to study in ESBAM are the 65-80 year old individuals living in households classified as poor according to SISFOH. The sampling selection is probabilistic, independent in each department, stratified in rural/urban areas and carried out in two steps. In the first step the Primary Sampling Units (PSU) are census units in urban areas and villages in rural areas with at least 4 households living in poverty and with elderly members. The selection of PSU is made by Probability Proportional to Size (PPS) according to the total number of households. In the second step, 4 households are randomly drawn from each PSU for interview and 2 for replacements. After dropping 65 individuals that did not answer the questionnaire themselves for the elderly (persons with severe impairments like blindness and deafness), 152 pensioners (85 individuals self-reported as *Pension 65*'s beneficiaries) and individuals with missing information in relevant variables, the final sample considered in the regressions corresponds to 3,790 individuals (see Table 1).

Table 1. Sample composition in ESBAM

Age group	Rural	Urban	Total
65-68	819	488	1307
69-72	678	403	1081
73-76	527	311	838
77-80	345	219	564
Total	2369	1421	3790

Source: Authors' elaboration on the base of ESBAM

² The department is the first political and territorial division in Peru, the second one is the province, and the third one is the district. Some districts, particularly in rural areas, are further divided in villages (*centros poblados*).

8

³ 35% of the sample was collected in November and 65% in December 2012.

3.2 The cognitive score

ESBAM uses a reduced version of the mini-mental state examination (MMSE) (Folstein M.F, Folstein S.E. and McHugh, 1975) to evaluate cognitive functioning of the elderly, which is similar to the adapted version used in the Survey on Health and Well-being of Elders (SABE) implemented during the early 2000s in seven capital cities of Latin America and the Caribbean. Taking into account the low literacy rates among Latin American elders, the reason for this adaptation was to minimize the strong bias produced by education on performing the test (Fillenbaum et al., 1988; Herzog and Wallace, 1997). This is relevant for our sample of elderly poor who report low literacy rates (28.5%).

Table 2. Distribution of cognitive score by question

Cognitive skills question (N=3790)	Correct answers (%)						
Cognitive skins question (N=3790)	0	1	2	3	4	Total	Score
Orientation	2.05	6.67	16.21	30.20	44.87	100.00	3.09
Word memory immediate recall	0.53	1.50	13.13	84.84	-	100.00	2.82
Command following	0.40	3.51	21.10	74.99	-	100.00	2.71
Word memory delayed recall	6.33	10.76	33.27	49.64	-	100.00	2.26
Drawing	12.04	87.96	-	-	-	100.00	0.88
Total	-	-	-	-	-	-	11.76

Source: authors' elaboration on the base of ESBAM.

Our score of cognitive functioning is computed with five questions dealing with different aspects of cognitive functioning. The first question is about *orientation* and asks about the day of the month, the month, year and day of the week. Each correct answer receives one point. The second question measures *immediate memory recall*; three words are mentioned and the respondent has to repeat them immediately after, in any order. These words are asked later again (forth question) in order to measure *delayed memory recall*. A point is given for each word correctly answered. The third question is a *command* of three actions that the respondent has to follow orderly: "I will give a piece of paper. Take this with your right hand, bend in half with both hands and place on your legs". Each correct action receives one point. In the fifth

question the respondent receives a point if she is able to replicate (*drawing*) a picture of two intersected circles, provided that the circles do not cross more than half. This measure captures the intactness of visual-spatial abilities. Our cognitive score is the result of summing up the points obtained on these five questions. Table 2 reports the distribution of points for each type of question.

The overall cognitive score ranges from 0 to 14 points (see Figure 1). The average score is 11.76 with a standard deviation of 2.03. This score is 11.85 for working individuals and 11.28 for non-working individuals, being the difference between these individuals statistically significant (t = 7.89). In addition, for the total sample, cognitive score for men is statistically significant larger than that of women (t=-11.43), which also holds among the group of working individuals (t=-10.35). This is also the case among the group of retired, though the significance is lower (t=-1.99).

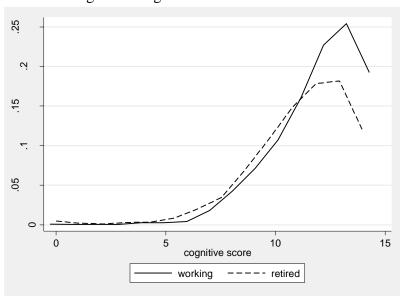


Figure 1. Cognitive score and retirement

Source: Authors' elaboration on the base of ESBAM.

We are also able to observe significant differences in cognitive ability between working and retired individuals of similar age (see Figure 2). The mean cognitive score is always lower for retired individuals of similar age, except for the oldest group where the difference is not significant (t=1.28). Moreover, Figure 2 depicts the well-known declining trend in cognitive abilities with aging. Contrary to other studies focused in developed countries, we are able to observe cognitive functioning for older working individual and compare it to that of retired persons. Overall, 71 percent of the elderly individuals in our sample are working, while this activity rate is 54 percent for the oldest group aged 77-80.

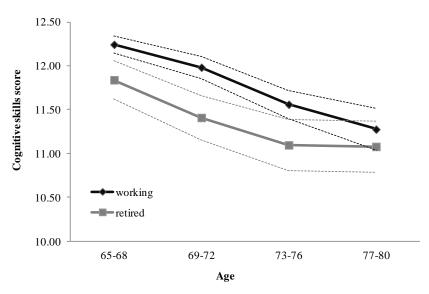


Figure 2. Cognitive score by age and retirement

Source: Authors' elaboration on the base of ESBAM. Dotted lines correspond to 95 percent confidence interval.

The cognition questions in ESBAM and our aggregate cognitive score keep some similarities with those employed by Lei et al. (2012, 2013) with the China Health and Retirement Longitudinal Study (CHARLS). They form an index of *episodic memory* by averaging the scores of *immediate* and *delayed memory recall* from a list of 10 words. Their second measure of *mental intactness* (ranges from 0 to 11) and includes the following items: a serial 7 subtractions from 100 (up to five times), a variable indicating whether the respondent needed any explanation or aid, *orientation* questions (month, day, year, day of the week and

season) and *ability to replicate a picture*. Although our cognitive scores are not directly comparable with CHARLS because of different sample selection and questions, they are closely related. For example, after normalizing the *mental intactness* from 0 to 1 in Lei et al. (2013), we observe that this is 0.71 for the Chinese aged 65-74, while this is 0.77 in our *orientation* measure in the same age group. The measure of *orientation* is also available in the Survey of Health, Ageing and Retirement in Europe (SHARE), although the values for the elderly Europeans are much higher⁴.

3.3 The retirement variable

The retirement status is a key variable in our analysis. Following Mazzona and Peracchi (2012), Rohwedder and Willis (2010) and Bonsang et al. (2012) we treat both retirees and unemployed as retired. In our sample, 70.8 percent of respondents are working, 27.9 percent are retired and only 1.3 percent is unemployed. The questions about retirement and employment status in ESBAM follow conventional questions in household surveys to detect if the individual is actively seeking a job or intends to come back to a previous post.

3.4 Administrative data

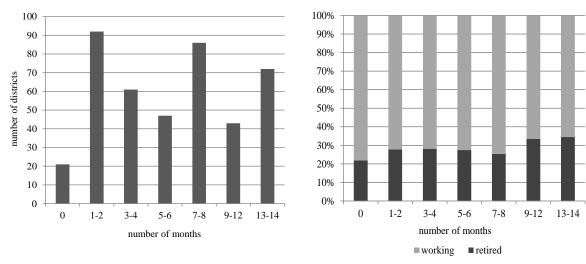
We also have administrative data of the program's beneficiaries by geographical location (at district level) and time since the implementation of the program in each district up to November 2012, i.e. just before the survey collection. In particular, we have the number of months the program is operating in each district and the total number of beneficiaries by district, both variables being measured in November 2012. Given that this data shows variation in the timing of the implementation of the program, we argue that observing a stronger presence of *Pension* 65 in the district can increase the expectation of an individual to receive the transfer and, therefore, accelerate the decision of retirement. Then, it is expected that only through this

⁴ We compute the orientation measure for the 65-80 years old individuals who belong to the bottom income quartile in each of the 19 European countries surveyed in SHARE (wave 2 and 4) and obtain an average of 3.71 (from 3.40 in Spain to 3.87 in Switzerland)

channel, cognition can be affected. For instance, Figure 3a shows the extent of variation of exposition of districts to the program, whilst Figure 3b depicts a positive association between the months exposed to the program in the district and the share of retirees in the same district.

Figure 3a. Number of months *Pension 65* is operating in the district

Figure 3b. Working status by number of months of *Pension 65* in the district



Source: Authors' elaboration on the base of ESBAM and administrative records of Pension 65.

4 Empirical Strategies

4.1 Identification issues

In measuring the effect of retirement on cognitive functioning in developed countries, other studies deal with the potential endogeneity (e.g. reverse causality) of retirement by using instrumental variables. For example, the argument exposed in Rohwedder and Willis (2010) is that individuals who have suffered more cognitive decline will self-select into retirement earlier than individuals who have not experienced this deterioration, and hence one will find a high correlation between cognition and retirement. Then, by exploiting country differences in age eligibility, retirement is instrumentalized with the difference between actual age and legal ages of retirement (normal and early). Studies using this strategy for US and Europe include

Rohwedder and Willis (2010), Mazzona and Peracchi (2012), Bingley and Martinello (2013) and Celidoni et al. (2013). Bonsang et al. (2012) use variation in legal age for early and normal retirement as instrumental variables for a US panel dataset.

However, in a country like Peru, social security covers only a small fraction of the labour force because of the large informal labour market. About 25 percent of the 65+ population receive a pension from social security, of those only 6 percent are poor and 1 percent extreme poor. As mentioned earlier, there is a high rate of labour activity among the elderly poor (71 percent) who also are less educated and work mostly in occupations where high cognitive skills are less demanded. Therefore, the use of retirement legislation as instrumental variables does not fit into our framework.

Although the endogeneity of retirement is less evident in our study, we attempt to address it by using the intensity of the *Pension 65* program in the district as a source of exogenous variation affecting cognitive only through retirement. Particularly, we use the number of months since *Pension 65* is available in the district and the total number of *Pension 65* beneficiaries in the district in November 2012. Since October 2011, *Pension 65* started to be gradually implemented along districts in Peru and we exploit the exogenous variation in the incidence (time and number of beneficiaries) of *Pension 65* as a source of exogenous variation for retirement. We argue that observing a stronger presence of the non-contributory program in the district might increase the expectations of old individuals of receiving the pension and cease employment. It is unlikely that the expansion of the program across districts was correlated with any retirement behaviour before the program was implemented. *Pension 65* started in October 2011 in six departments classified as the poorest according to the official 2009's poverty map of the National Institute of Statistics (*INEI*), and then moved to other departments. Along the process of expansion, the timing to evaluate the socio-economic conditions of the households needed to assign a poverty classification was diverse across

districts and depended on administrative and logistic resources of local governments. In addition, the validation process of recipients made by the National Identity Office (*RENIEC*), Social Security institutions (*ESSALUD* and *SBS*) and Ministry of Labour's payroll office took different time durations based on the arrival of household's dossiers. All these features make difficult to believe that the expansion of the program and the uptake of the transfer are correlated with any previous retirement behaviour in the district. In any case, we have checked that the number of months the program is available in the district and the number of recipients in the district are not correlated at any significant level with the share of elderly retired individuals in the district. The information of the share of elderly retirees is drawn from the 2010 National Household Survey (*ENAHO*) which is the most prominent survey to measure household and individual living conditions in Peru⁵.

It is worthy to note that the validity of age eligibility for retirement as an instrument has been recently contested due to the no inclusion of schooling in controlling the effects of retirement on cognitive scores (Bingley and Martinello, 2013). It is argued that schooling and cognitive performance are highly correlated, and simultaneously schooling has an effect on the age of retirement selected by the individual. Once Bingley and Martinello (2013) include schooling in the cognitive equation of Rohwedder and Willis (2010), they still find a significant effect of retirement on cognitive score, but the size of the effect is reduced. Furthermore, Bonsang et al. (2012) acknowledges the limitations of cross-country variation in age eligibility to instrument retirement because of the existence of institutional and cultural differences among countries beyond retirement scheme differences (for example, eligibility age tend to be higher in Northern than in Southern Europe). The authors argue that being unable to account

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⁵ The correlation of the number of months the program is present in the district and the number of beneficiaries in the district with the share of elderly retirees in the district is 0.0523 and -0.0278, respectively. Because there are some ESBAM districts that are not surveyed in 2010's ENAHO, we also inspected the same previous relationships at the level of the province and we did not detect any correlation with statistical significance. In that case, the corresponding correlations were -0.0658 and -0.1279.

for these differences can invalidate the exclusion restrictions and hence overestimate the effects of retirement on cognition.

In contrast to other studies in developed countries, we are able to observe cognitive functioning of individuals working at more advanced ages. However, we cannot control for individual heterogeneity as panel data is not available. Nevertheless, in measuring the effect of retirement on cognition we depart from previous related literature by controlling the influence of different confounders, such as schooling, sex, age and objective measure of health. This allows us to reduce the potential omitted variables bias in the measurement of cognitive scores. In our empirical strategy we first use OLS estimation to measure the effect of retirement on cognition with the following equation:

$$c_i = \alpha_0 + \alpha_1 r_i + {x'}_i \beta + u_i \tag{1}$$

Where c corresponds to the standardized cognitive score; r is a dummy variable for whether the individual is retired or not; x' is a regressor vector of exogenous variables; and, u_i is the regression error, which in the OLS model is assumed to be uncorrelated with r and x'. To show the bias of omitting relevant variables, in the next section we show different specifications of equation (1), including covariates in x'. Finally, we include in equation (1) district fixed-effects (FE) to account for unobserved heterogeneity at district level (e.g. labour market conditions, long-term community deprivation of education, health and basic services and healthy environments).

To deal with the potential reverse causality between the decision of retirement and cognition or their potential correlation with unobservable variables contained in u_i , we consider a Control Function (CF) approach. Instead of an IV approach, CF is used to explicitly account

for the binary nature of the retirement variable. In contrast to equation (1), r is now considered an endogenous variable, which satisfies the following reduced-form model:

$$r_i^* = x_i' \gamma + \delta z_i + v_i \tag{2}$$

Where r^* is a latent variable that determines whether $r_i = 1$ or 0; the exogenous regressors in vector x' are instruments for themselves; z_i is an instrumental variable that is expected to satisfy the assumption that $E(u_i|z_i) = 0$ and to be correlated with r_i . The errors (u_i, v_i) are assumed to be correlated bivariate normal with $Var(u_i) = \sigma^2$, $Var(v_i) = 1$, and $Cov(u_i, v_i) = \rho\sigma^2$. If the error correlation $\rho = 0$, then the errors of the structural equation (u_i) and the one of the "treatment" equation (v_i) are independent and there is no endogeneity problem.

4.2 Control variables

We include a set of conventional control variables: age, sex, and schooling. In addition, we include objective health indicators collected in ESBAM that are expected to affect cognitive skills: haemoglobin, arm-span (proxy of parental inputs at early ages) and chronic diseases related to mental health.

Haemoglobin is measured from extracted respondents' blood samples and corrected by altitude by the National Institute of Statistics. We use this variable in order to consider the effect of anaemia, which has been linked to an increase in the risk of dementia through low oxygen levels affecting brain connections and hence reducing memory and thinking abilities and damaging neurons (Hong et al., 2013). According to WHO norms, haemoglobin levels should be roughly between 12 g/dL to 16 g/dL. In our sample, the mean of haemoglobin is 13.1; 23.8 percent of respondents have less than 12 g/dL, and 5.5 percent have more than 16

g/dL⁶. The inclusion of this variable is aimed at measuring the effect of current nutritional status.

Moreover, it is recognized that cognition performance in later age is positively related with nutrition quality acquired in childhood. Case and Paxon (2008) find a strong correlation between height at early life (<3 years) and adulthood, so that this last variable can indicate the nutrition and health experienced at early life. In addition to these authors, Guven and Lee (2013a, 2013b) and Lei et al. (2012 and 2013) also use respondent's height to find that better nutrition in childhood is positively associated with cognitive ability development. Height is not measured in ESBAM because of the well-known limitations of taking this measure in old-age population (height shrinking, difficulty to stand straight, etc.). Instead, we use arm-span which is considered a better measure in old-age individuals and is highly correlated with height (Kwok and Whitelaw, 1991; Kwok, Lau and Woo, 2002; De Lucia et al., 2002). The evidence for Latin America shows a significant relation between height and cognitive functioning at oldage (e.g. Yount et al., 2009, for Guatemala; and, Maurer, 2010, for 7 capital cities using the SABE data).

We also control for some chronic diseases that might affect cognition status irrespective of retirement. For example, it has been found in longitudinal studies that depression exacerbates the risk of cognitive decline among the elderly (Chodosh et al., 2007; Dotson, Resnick and Zonderman, 2008). We will use a dummy variable indicating whether or not the respondent reported having any of the following diseases diagnosed by a doctor: depression, cerebral haemorrhage and nervous system disorders, Alzheimer or memory loss. One fifth of our sample reported having at least one of these disorders.

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⁶ Aanemia can affect an important number of elderly because old-age is associated with diet monotony, less intestinal mobility and intake of energy.

Schooling is also expected to affect cognition performance at old-age. For instance, Glymour et al. (2008) report that there is a significant and positive effect of education on memory among the elderly, but this effect is not significant on mental status (constructed with the correct answers to seven consecutive subtractions). A recent study by Banks and Mazzonna (2012), based on a regression discontinuity design, supports the hypothesis that an increase in compulsory education affected old-age cognitive abilities in England. In our sample, almost one third of the elderly are illiterate (28.5 percent) and 80 percent have not even completed primary school. Given this, we consider that an indicator for whether an individual is able to read and write is more relevant to explain cognitive skills.

Furthermore, we also control for ethnicity by including dummies of the individual's mother tongue (Quechua and Aymara). The inclusion of ethnicity is aimed at accounting for cumulative deprivation experienced by indigenous groups in many dimensions which might have affected cognition and go beyond education and health⁷. We should highlight that ESBAM allocated bilingual interviewers to localities with large concentration of indigenous individuals, so that the interview could be conducted in the language the respondent was more confident with.

Table 3 shows the unconditional mean values of the main variable considered in the empirical analysis for working and retired individuals. The mean value of the cognitive aggregate z-score and the values of its components are significantly lower for retired than for working individuals. Retired individuals are more likely to be female, older and illiterate. They also have poorer health (arm-span, haemoglobin, mental disorders and disabilities), are more likely to live in urban areas and where the extreme poverty rates are marginally inferior.

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⁷ For example, Dell (2010) has illustrated the long term effects of mandatory mining work in Peru's highlands on present health of indigenous. In the particular case of the generation of our sample, other severe limitations suffered are that the illiterate were not allowed to vote in political elections before 1980, and that the Agrarian Reform Bill (Reforma Agraria) was only carried out during the early 1970s. This major redistribution of land represented the end of the *Haciendas* system in which an impoverished labour force (peasants) was attached to rural states.

Table 3. Differences between working and retired individuals

Variable	Working	Retired	Diff.a
Cognitive score (z-score)	0.10	-0.17	***
Orientation	3.16	2.77	***
Command	2.69	2.72	*
Total memory	5.10	4.97	***
Word memory immediate recall	2.83	2.78	***
Word memory delayed recall	2.27	2.19	**
Drawing	0.89	0.82	***
Male (yes=1)	0.65	0.30	***
Age	70.64	72.34	***
Illiterate (yes=1)	0.24	0.39	***
Mother tongue is Quechua (yes=1)	0.27	0.19	***
Mother tongue is Aymara (yes=1)	0.06	0.02	***
Arm span (cm.)	157.73	152.43	***
Haemoglobin	13.14	12.72	***
Mental disorders (yes=1)	0.17	0.25	***
Household size	2.98	3.28	***
Married (yes=1)	0.73	0.65	***
Urban (yes=1)	0.31	0.52	***
Extreme poverty rate in 2009 in the district	21.70	19.61	***
Pension 65 users (thousands) in Nov.'12 in the district	0.27	0.31	***
Months Pension 65 is available in the district	7.15	7.76	***

Note: a .T-test of mean differences between working and retired individuals. * p<0.1 ** p<0.05 *** p<0.01.

5 Results

This section describes the results of three groups of estimations: (i) OLS models when we gradually introduce covariates and where retirement is considered as exogenous; (ii) a fixed-effect model with the complete set of covariates, which accounts for unobserved characteristics at district level; and (iii) the testing of the exogeneity of retirement and presentation of the results of the CF estimation.

5.1 Main results

Table 4 shows the OLS (columns 1-6) and FE (column 7) estimations of our cognitive score (standardized)⁸ considering the retirement dummy as exogenous and where covariates are gradually introduced.

⁸ Guven and Lee (2013b) use a summary measure of cognition by averaging four dimensions of cognitive functioning which were previously standardized to have a mean zero and standard deviation of one.

Table 4: OLS estimation of the cognitive z-score

Retired (yes=1) Male (yes=1)	-0.265*** (0.038)	-0.135*** (0.036)	-0.121***	-0.119***	-0.140***	-0.141***	0.155***
Male (yes=1)	(0.038)	(0.036)			0.1 10	-0.141	-0.155***
Male (yes=1)	-	(0.030)	(0.035)	(0.036)	(0.035)	(0.035)	(0.038)
		0.039	-0.084*	-0.083*	-0.060	-0.062	-0.088*
	-	(0.031)	(0.043)	(0.043)	(0.044)	(0.044)	(0.050)
Age	-	-0.035***	-0.033***	-0.033***	-0.033***	-0.033***	-0.032***
	-	(0.003)	(0.003)	(0.003)	(0.003)	(0.003)	(0.003)
Illiterate (yes=1)	-	-0.695***	-0.691***	-0.690***	-0.670***	-0.672***	-0.675***
	-	(0.039)	(0.038)	(0.038)	(0.036)	(0.037)	(0.040)
Mother tongue is Quechua (yes=1)	-	-0.292***	-0.285***	-0.286***	-0.290***	-0.287***	0.060
	-	(0.041)	(0.042)	(0.042)	(0.042)	(0.042)	(0.082)
Mother tongue is Aymara (yes=1)	-	-0.600***	-0.605***	-0.608***	-0.584***	-0.593***	-0.373***
	-	(0.091)	(0.090)	(0.090)	(0.092)	(0.088)	(0.132)
Arm span	-	-	0.007***	0.008***	0.007***	0.007***	0.008***
	-	-	(0.002)	(0.002)	(0.002)	(0.002)	(0.002)
Haemoglobin	-	-	0.022**	0.022**	0.019**	0.019**	0.023**
	-	-	(0.009)	(0.009)	(0.009)	(0.009)	(0.010)
Mental disorders (yes=1)	-	-	-0.147***	-0.148***	-0.158***	-0.160***	-0.197***
	-	-	(0.040)	(0.040)	(0.039)	(0.039)	(0.046)
Household size	-	-	-	-0.005	-0.009	-0.009	-0.011
	-	-	-	(0.007)	(0.007)	(0.007)	(0.008)
Married (yes=1)	-	-	-	0.003	0.018	0.017	0.019
	-	-	-	(0.035)	(0.035)	(0.035)	(0.038)
Urban (yes=1)	-	-	-	-	0.127***	0.143***	0.154**
	-	-	-	-	(0.033)	(0.038)	(0.072)
Extreme poverty rate in 2009 in the district	-	-	-	-	-	0.001	-
	-	-	-	-	-	(0.001)	-
Constant	0.097***	2.832***	1.335***	1.358***	1.408***	1.352***	1.124**
	(0.025)	(0.223)	(0.428)	(0.429)	(0.424)	(0.434)	(0.492)
District-level fixed effects	No	No	No	No	No	No	Yes
Observations	3790	3790	3790	3790	3790	3790	3790
R-squared	0.02	0.20	0.21	0.21	0.21	0.21	0.33

Note: Standard errors clustered at district-level are shown in parentheses. * p<0.1 ** p<0.05 *** p<0.01.

As expected, the model in column 1 shows that our main variable of interest, the retirement dummy, is negatively associated with the cognitive score. Retired individuals show a cognitive score that is 0.27 standard deviations below the one for working individuals. When gender, age, schooling and ethnicity are introduced (column 2) the coefficient on retirement considerably decreases to -0.14 standard deviations. An additional year in age decreases the cognitive score in 0.03 standard deviations, which remains constant across the different models⁹. Moreover, being illiterate is negatively associated with the cognitive score (around -

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⁹ We also try introducing age in quadratic form, and although the other coefficients and their significance did not change, age became not significant. This is, perhaps, because the range of age in our sample (65 to 80) is not large enough in comparison to other studies that find a significant coefficient for polynomials of age. For instance, Bonsang et al. (2012) use individuals aged 50+ and Lei et al. (2013) use individuals aged 45+.

0.68 standard deviations across all models in Table 4). Finally, having an indigenous mother tongue (Quechua or Aymara) is negatively associated with the cognitive score. This is likely to be reflecting long-term disparities in access to education or other services for indigenous populations in Peru.

In column 3, we add three health indicators. As expected, it is found that current (haemoglobin) and long-term (arm span) nutritional status are positively associated to the cognitive score. In contrast, having mental disorders is negatively associated to cognition. Including these variables decreases the coefficient on retirement further. Similarly to Guven and Lee (2013b) in their sample of elderly Europeans, we also find that being male is associated with less cognitive functioning. In their study, with the exception of *numeracy*, being male is negatively associated with different measures of cognition (*verbal fluency, immediate and delayed recall and a summary cognitive score*). A similar result holds for elder males in China when a measure of *memory* is considered (Lei et al. 2013). However, males perform better than females when the measure of cognition is *mental intactness* (which includes *orientation*). In column 4, we include two additional relevant variables expected to be positively associated to the cognitive score: a variable for the household size and a dummy for whether the individual is married\cohabiting or not. These variables are however not statistically significant and do not statistically affect the size of the coefficient on retirement.

To partially account for differences in rural and urban areas (e.g. labour market conditions, access to services), we introduce in column 5 a dummy variable for whether the individual lives in an urban area. Living in urban areas is positively associated to the cognitive score. The coefficient on retirement also increases (to -0.14), which also reflects disparities between rural and urban areas in terms of retirement. Finally, the last OLS model (column 6) includes the 2009 extreme poverty rate at the district-level, which was initially used by the Ministry of Social Development and Inclusion to target and expand the geographical coverage

of their social programs, including *Pension 65*. After controlling for the set of other covariates, we find neither associations between this variable and cognition nor changes on the coefficient of retirement.

Finally, to further deal with unobserved variables at the district level that might affect cognition, column 7 in Table 4 includes district fixed-effects. The increase in the coefficient on retirement (from -0.14 to -0.16) reflects the heterogeneity of districts in our sample (e.g. in terms of concentration of indigenous population and cumulative deprivations) and that unobserved variables at district level might affect retirement. The change in the coefficient on retirement between the models in columns 6 and 7 (0.01 standard deviations) is however reduced in size and should not represent a major concern for the following analysis. Given that our instrumental variables are at district level we are not able to include FE at district level in the CF estimations of Table 5.

Table 4 shows evidence that not including additional covariates other than retirement, significantly overestimate the coefficient on retirement (it decreases from -0.27 to -0.16 standard deviations). Because dealing with the omitted variable bias problem substantially reduced the magnitude of the coefficient on retirement, we might expect that dealing with the potential endogeneity of retirement, if relevant, would reduce the coefficient further.

As discussed in section 4, retirement is likely to be correlated with individual unobservable characteristics that also affect cognition, or both variables can suffer from reverse causality. To deal with the potential endogeneity of retirement, and considering its binary nature, we estimate a full MLE Control Function model. The estimates in Table 5 correspond to the CF estimation of the cognitive z-score on the set of covariates included in the model of column 6 in Table 4.

Table 5: CF estimations of the cognitive z-score

Control Function estimation	(8)
Main Equation: Cognitive score	
Retired (yes=1)	-0.144
	(0.171)
Male (yes=1)	-0.062
	(0.045)
Age	-0.033***
	(0.003)
Illiterate (yes=1)	-0.672***
	(0.038)
Mother tongue is Quechua (yes=1)	-0.287***
	(0.034)
Mother tongue is Aymara (yes=1)	-0.593***
	(0.060)
Arm span	0.007***
	(0.002)
Haemoglobin	0.019**
	(0.008)
Mental disorders (yes=1)	-0.160***
	(0.034)
Household size	-0.009
	(0.007)
Married (yes=1)	0.017
	(0.029)
Urban (yes=1)	0.143***
	(0.031)
Extreme poverty rate in 2009 in the district	0.001
	(0.001)
Constant	1.353***
	(0.450)
Treatment equation: Retirement	
Months Pension 65 is available in the district	0.018***
	(0.004)
Constant	-0.682***
	(0.035)
Rho	0.002
Sigma	0.843
Lambda	0.001
Wald test of $\rho = 0$: $\chi 2$ (df = 1)	0.988
Observations	3790

Note: The Control Function (CF) model is estimated by full MLE. Standard errors are given in parenthesis and correspond to bootstrap (100 replications) samples of individuals within districts. * p<0.1 ** p<0.05 *** p<0.01.

Table 5 shows that the CF estimates of retirement are similar to those of the OLS model in Table 4, with the second one being biased downward¹⁰, although the size of the bias is negligible. Moreover, in the first stage, we find that a stronger presence of the *Pension 65* program in the district is statistically associated with an increase in the probability of retirement. The likelihood-ratio test at the bottom of Table 5 indicates that we cannot reject the null hypothesis that the error terms of the reduced-form and main-equation are uncorrelated and there is no endogeneity problem. This suggests that applying the OLS model is appropriate and brings unbiased estimates.

In comparing our estimates of the effect of retirement on cognition with other studies accounting for the reverse causality between retirement and cognition, we observe some substantial differences. Note, however, that this comparison must be done with caution because of differences regarding the cognitive score computation and sample selection. For instance, Rohwedder and Willis (2010) use age retirement eligibility as IV to estimate the effect of retirement on the memory score of a sample of American and European 50+ individuals. This effect is about -1.5 standard deviations, though it must be noted that these results are not controlled by variables other than the IV and the retirement indicator. Bingley and Martinello (2013) replicate the mentioned study and add schooling and gender as extra controls. We infer from their results that the effect of retirement on cognition is reduced to -0.9 standard deviations. Coe and Zamarro (2011) also use similar IV and sample (only Europeans 50+) as the previous studies but include a broader set of control variables such as socio-demographics, health and social activities. From the results of Coe and Zamarro (2011) we can infer that the effect of retirement on memory is about -0.08 SD with OLS but it is not statistically different

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¹⁰ Table A2 in the Appendix includes an additional CF estimation using the number of Pension 65 beneficiaries in the district just before the ESBAM baseline was collected (October-November 2012). Similarly to Table 5, we cannot reject the null hypothesis that the errors in the retirement and cognition equations are independent.

¹¹ The population standard deviation of the memory score is not reported in Coe and Zamarro (2011), but we assume that this is similar (is 3.3) to the one reported in Rohwedder and Willis (2010) who also use the same cognitive score and data source (SHARE), although include two additional countries (USA and UK).

from zero when IV estimation is employed. So, adding more controls attenuates the problem of omitted variable and reduces the effects of retirement on cognition. The magnitude of this last effect is much closer to ours than what other studies have shown. In our case, we do not find endogeneity between retirement and cognition and, in addition, the effect of retirement on cognition is smaller in magnitude than in the previous studies, which might be due to the characteristics of our sample.

The occupations in which elderly individuals in our sample worked are likely to be very precarious (given that 80 percent of them have not even completed primary school) and did not involve the use of high cognitive skills. Therefore, while in our sample retirement reduces cognition, its impact is smaller than the one found on samples of relatively better-skilled workers in the US and Europe.

Table 6: Robustness check – Different definitions of cognitive score

	Orientation	Command	Total memory	Drawing	Total cognitive
Retired (yes=1)	-0.161***	0.004	-0.119**	-0.027**	-0.303***
	(0.039)	(0.024)	(0.047)	(0.014)	(0.075)
District-level fixed effects	No	No	No	No	No
Observations	3790	3790	3790	3790	3790
R-squared	0.25	0.06	0.07	0.11	0.21

Note: Standard errors clustered at district-level are shown in parentheses. * p<0.1 ** p<0.05 *** p<0.01.

As an additional analysis we estimate the effect of retirement on the levels of each of the four components of our cognitive score: *orientation, command, total memory (including immediate and delayed word memory recall)* and *drawing*. These regressions consider the same set of covariates included in column 6 in Table 4. Each column of Table 6 corresponds to separated OLS estimations of the effect of retirement on each of the mentioned components of cognition. Table 6 reports only the coefficient on retirement since it is our main variable of

interest¹². Note that, unlike the previous specifications, the dependent variables in Table 6 correspond to the points obtained in the cognition test instead of the standardized values.

A first sight of the regressions in Table 6 shows that the effect of retirement on *orientation* is the largest, followed by the one on *memory*. In all the specifications the effect of retirement shows the expected negative sign, being the effect on *drawing*, which captures visual-spatial abilities, the less affected. No effect of retirement on command is found.

6 Discussion

In this paper we have shown that retirement has a causal negative impact on the cognitive functioning of the elderly poor. This effect is about four times larger than the effect of age on retirement and robust to the inclusion of a number of other factors associated to cognition. The richness of the survey data ESBAM employed in this study allows us to use objective measures of health that affect cognitive functioning, jointly with cognitive tests and other standard demographic variables, which are rarely available in developing countries. There is an emerging economic literature on the effects of retirement on cognitive abilities, but this is mainly based in developed economies. In this way, our study contributes to this literature by focussing on a developing country, which presents a completely different setting: low social security coverage rates, very long or never-ending working lives, credit constraints, etc.

Moreover, our study can be useful for policy-making to assess what potential negative effects can bring the recent emergence of non-contributory pension programs in Latin America and other low and middle-income countries. These programs can induce a significant number of elderly into retirement and hence accelerate the decline of their cognitive abilities if these individuals do not maintain an engaged life style after retirement. As a consequence, this might create an important public health problem in the context of ageing societies. Cognitive

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¹² The complete tables are available upon request.

impairment or dementia is associated with lower quality of life, more disability and higher health expenditures. Furthermore, it is important to maintain healthy elderly individuals as they play an important role in transmitting traditions, dialects, costumes and community memories.

Perhaps, a way to lessen the potential effect of sudden retirement on cognition is not only providing non-contributory pensions to the elderly poor, but also other attached components aimed at maintaining their cognitive functioning or at least retarding its decline. It might be the case that these new non-contributory pension schemes for the elderly should learn from the conditional cash transfer programs that tie the transfer to the accomplishment of some compulsory fulfilments to assure the wellbeing of the beneficiaries.

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References

- Banks, James and Fabrizio Mazzonna. 2012. The effect of education on old age cognitive abilities: Evidence from a regression discontinuity design. *The Economic Journal* 122 (May), 418–448.
- Benjamin, Dwayne, Loren Brandt, and Jia-Zhueng Fan. 2003. Ceaseless toil? Health and labor supply of the elderly in rural China. Working paper no. 579, William Davidson Institute, Michigan.
- Bingley, Paul and Alessandro Martinello. 2013. Mental retirement and schooling. *European Economic Review* 63: 292-298.
- Börsch-Supan, Axel. 2013. Myths, scientific evidence and economic policy in an aging world.

 The Journal of the Economics of Ageing 1-2: 3-15.
- Bonsang, Erik, Stephan Adam, and Sergio Perelman. 2012. Does retirement affect cognitive functioning? *Journal of Health Economics* 31: 490-501.
- Case, Anne and Christina Paxson. 2008. Height, health and cognitive function at older ages"

 American Economic Review: Paper & Proceedings 98: 463-467.
- Celidoni, Martina, Chiara Dal Bianco and Guglielmo Weber. 2013. Early retirement and cognitive decline. A longitudinal analysis using SHARE data. Working Paper no. 174, Department of Economics and Management, University of Padua, Padua.
- Chodosh, Joshua, Deborah M. Kado, Teresa E. Seeman, and Arun S. Karlamangla. 2007.

 Depressive symptoms as a predictor of cognitive decline: MacArthur Studies of Successful Aging. *The American Journal of Geriatric Psychiatry* 15: 406-415.
- Coe, Norma B., and Gema Zamarro. 2011. Retirement effects on health in Europe. *Journal of Health Economics* 30: 77–86.
- Cunha, Flavio, and James Heckman. 2007. The Technology of Skill Formation. *American Economic Review*, 97: 31–47.

- -----. 2008. Formulating, identifying and estimating the technology of cognitive and noncognitive skill formation. *Journal of Human Resources*, 43: 738–782.
- Cunha, Flavio, James J. Heckman, Lance Lochner, and Dimitriy V. Masterov. 2006. Interpreting the evidence on life cycle skill formation. In *Handbook of the Economics of Education*, ed. Hanushek, Eric A and FinisWelch. Amsterdam: North-Holland, Chapter 12, 697–812.
- Cunha, Flavio, James J. Heckman, and Susanne M. Schennach. 2010. Supplement to 'Estimating the technology of cognitive and noncognitive skill formation: Appendix'. *Econometrica* 78(3): 883-931.
- Davis-Friedmann, Deborah. 1991. *Long lives: Chinese elderly and the communist revolution*. Stanford: Stanford University Press.
- De Carvalho-Filho, Irineu Evangelista. 2008. Old-age benefits and retirement decisions of rural elderly in Brazil. *Journal of Development Economics*, 86, no. 1: 129-146.
- De Lucia, E., Fabrizio Lemma, Fikru Tesfaye, Tsegaye Demisse, and Saila Ismail. 2002. The use of armspan measurement to assess the nutritional status of adults in four Ethiopian ethnic groups. *European Journal of Clinical Nutrition* 56(2): 91-95.
- Dell, Melisa. 2010. The Persistent effects of Peru's mining Mita. *Econometrica* 78(6): 1863-1903.
- Dotson, Vonetta M., Susan M. Resnick, and Alan B. Zonderman. 2008. Differential association of concurrent, baseline, and average depressive symptoms with cognitive decline in older adults. *American Journal of Geriatric Psychiatry* 16: 318-330.
- Fillenbaum, G. G., D. C. Hughes, A. Heyman, L. K. George, and D. G. Blazer. 1988.

 Relationship of health and demographic characteristics to Mini-Mental State Examination score among community residents. *Psychological Medicine* 18: 719-726.

- Folstein, Marshal F., Susan E. Folstein, and Paul R. McHugh. 1975. "Mini-mental state": A practical method for grading the cognitive state of patients for the clinician. *Journal of Psychiatric Research* 12 (3): 189-98.
- Glymour, M. M., Ichiro Kawachi, Christopher S. Jencks, and Lisa F. Berkman. 2008. Does childhood schooling affect old age memory or mental status? Using state schooling laws as natural experiments. *Journal of Epidemiology and Community Health* 62(6): 532-537.
- Guven, Cahit, and Wang Sheng Lee. 2013a. Height and cognitive function at older ages: Is height a useful summary measure of early childhood experiences? *Health Economics*, 22: 224-233.
- -----. 2013b. Height, ageing and cognitive abilities across Europe. *Economics & Human Biology*, http://dx.doi.org/10.1016/j.ehb.2013.12.005.
- Herzog, A. Regula, and Robert B. Wallace. 1997. Measures of cognitive functioning in the AHEAD study. *The Journals of Gerontology Series B*, 52B (Special Issue): 37-48.
- Hong, Chang Hyung, Cherie Falvey, Tamara B. Harris, Eleanor M. Simonsick, Suzanne Satterfield, Luigi Ferrucci, Andrea L. Metti, Kushang V. Patel, and Kristine Yaffe. 2013.

 Anemia and risk of dementia in older adults. Findings from the Health ABC study.

 Neurology 81(6): 528-533.
- Jorm, Anthony F., Bryan Rodgers, A. Scott Henderson, Ailsa E. Korten, Patricia A. Jacomb, Helen Christensen, and Andrew Mackinnon. 1998. Occupation type as a predictor of cognitive decline and dementia in old age. *Age and Ageing* 27(4): 477-483.
- Kwok, Terry, and M. N. Whitelaw. 1991. The use of armspan in nutritional assessment of the elderly. *Journal of the American Geriatrics Society* 39(5): 492-6.
- Kwok, Terry, E. Lau and J. Woo. 2002. The prediction of height by armspan in older Chinese people. *Annals of Human Biology* 29(6): 649-56.

- Lei, Xiaoyan, Yuqing Hu, John J. McArdle, James P. Smith, and Yaohui Zhao. 2012. Gender differences in cognition among older adults in China. *Journal of Human Resources* 47(4): 951-971.
- Lei, Xiaoyan, James P. Smith, Xiaoting Sun and Yaohui Zhao. 2013. Gender differences in cognition in China and reasons for change over time: Evidence from CHARLS. Discussion Paper No. 7536, IZA, Bonn.
- Maurer, Jurgen. 2010. Height, education and cognitive function at older ages: International evidence from Latin America and the Caribbean. *Economics and Human Biology*, 8: 168-176.
- Mazzonna, Fabrizio, and Franco Peracchi. 2012. Aging, cognitive abilities, and retirement. *European Economic Review* 56: 691-710.
- McFadden, Daniel. 2008. Human capital accumulation and depreciation. *Review of Agricultural Economics* 30: 379-385.
- Olivera, Javier and Blanca Zuluaga. 2014. The ex-ante effects of non-contributory pensions in Colombia and Peru. *Journal of International Development*, 26(7): 949-973.
- Potter, Guy G., Michael J. Helms, and Brenda L. Plassman. 2008. Associations of job demands and intelligence with cognitive performance among men in late life. *Neurology* 70: 1803-1808.
- Rofman, Rafael and Maria L. Oliveri. 2011. La cobertura de los sistemas previsionales en América Latina: conceptos e indicadores. Serie de Documentos de Trabajo sobre Políticas Sociales Nº 7, Oficina Regional para América Latina del Banco Mundial.
- Rohwedder, Susann, and Robert J. Willis. 2010. Mental retirement. *Journal of Economic Perspectives* 24 (1): 1-20.
- Rowe, John W., and Robert L. Kahn. 1998. Successful Aging, New York: Pantheon Books.

- Salthouse, Timothy A. 1996. The Processing-speed theory of adult age differences in cognition.

 *Psychological Review 103(3): 403-428.
- -----. 2006. Mental exercise and mental aging: evaluating the validity of the use it or lose it hypothesis. *Perspectives on Psychological Science* 1: 68-87.
- Schooler, Carmi, Mesfin Samuel Mulatu, and Gary Oates. 1999. The continuing effects of substantively complex work on the intellectual functioning of older workers. *Psychology and Aging* 14: 483-506.
- Tood, Petra. E. and Kenneth I. Wolpin. 2003. On the specification and estimation of the production function for cognitive achievement. *Economic Journal*, 113, F3–F33.
- World Health Organization. 2002. Active Ageing: A Policy Framework. Geneva: World Health Organization.
- Wooldridge, Jeffrey M. 2010. *Econometric analysis of cross section and panel data*. 2nd ed. Cambridge, MA: MIT Press.
- Yount, Kathryn M., John Hoddinott, Aryeh D. Stein, and Ann M. DiGirolamo. 2009. Individual capital and cognitive ageing in Guatemala. *Population Studies*, 63, 295–306.

Appendix

Table A1. Non-contributory pension programs in Latin America

Country	Name of scheme	Year's creation	Benefit (percent GDP p. c.)	Age	Targeting	Number of recipients	percent Pop 60+ covered	Cost (percent GDP)
Argentina	Pensiones Asistenciales	1,994	14.4	70	Means-tested	75,229	1.3	0.23
Bolivia	Renta Dignidad	2,008	1.6	60	Universal	788,969	103.3	1.06
Brazil	Previdencia Rural	1,991	32.6	60 (m) / 55 (f)	Means-tested and for rural area	5,851,554	28.3	1.50
Brazil	Beneficio de Prestacao Continuada	n.d.	32.6	65	Means-tested	1,700,000	n.d.	0.30
Chile	Pension Basica Solidaria de Vejez	2,008	13.6	65	Means-tested	403,144	16.7	0.90
Colombia	Programa Colombia Mayor	2,003	5.1	57 (m) / 52 (f)	Means-tested, Regional	214,480	6.4	0.02
Costa Rica	Programa Regimen No Contributivo	1,974	20.2	65	Means-tested	83,438	19.7	0.18
Ecuador	Pension para Adultos Mayores	2,003	11.8	65	Means-tested	583,817	39.2	0.31
El Salvador	Pension Basica Universal	2,009	16.9	70	Means-tested	13,600	2.3	0.04
Guatemala	Programa de aporte economico del Adulto Mayor	2,005	19.5	65	Means-tested	103,125	11.2	n.d.
Honduras	Bono para la Tercera Edad	2,011	1.3	65	Means-tested	66,667	8.5	0.01
Mexico	65 y mas	2,007	0.4	65	Pensions-tested	2,200,000	22.4	0.11
Mexico	Pension Alimentaria Ciudadana	2,003	8.5	68	In Mexico City (Universal)	2,000,000	20.4	0.04
Mexico	Amanecer	2,007	5.2	64	In Chiapas State (Universal)	238,000	2.4	n.d.
Panama	100 a los 70	2,009	14.1	70	Pensions-tested	86,392	22.5	n.d.
Peru	Pension 65	2,011	9.3	65	Means-tested	247,673	9.1	0.19
Paraguay	Pension alimentaria	2,009	30.7	65	Means-tested	31,454	5.9	0.00
Uruguay	Programa de Pensiones No- Contributivas	1,995	27.8	70	Means-tested	31,577	5.1	0.62
Venezuela	Gran Mision Amor Mayor	2,011	40.8	60 (m) / 55 (f)	Means-tested	675,000	24.6	0.02

Source: Olivera and Zuluaga (2014) and Government sites for Honduras and Peru figures.

Table A2: CF estimation of the cognitive z-score (Full model) - Number of *Pension 65* users in the district, Oct-Nov 2012

Control Function estimation	(9)
Main Equation: Cognitive score	
Retired (yes=1)	-0.080
	(0.056)
Male (yes=1)	-0.062
	(0.045)
Age	-0.033***
	(0.003)
Illiterate (yes=1)	-0.672***
	(0.037)
Mother tongue is Quechua (yes=1)	-0.287***
	(0.032)
Mother tongue is Aymara (yes=1)	-0.594***
	(0.069)
Arm span	0.007***
	(0.002)
Haemoglobin	0.019**
	(0.007)
Mental disorders (yes=1)	-0.160***
	(0.032)
Household size	-0.009
	(0.006)
Married (yes=1)	0.017
	(0.030)
Urban (yes=1)	0.142***
	(0.029)
Extreme poverty rate in 2009 in the district	0.001
	(0.001)
Constant	1.332***
	(0.395)
Treatment equation: Retirement	
Pension 65 users (thousands) in Nov.'12 in the district	0.238***
	(0.059)
Constant	-0.618***
	(0.026)
Rho	-0.044
Sigma	0.843
Lambda	-0.037
Wald test of $\rho = 0$: $\chi 2$ (df = 1)	0.686
Observations	3790
Note: The Control Function (CF) model is estimated	by full MLE.

Note: The Control Function (CF) model is estimated by full MLE. Standard errors are given in parenthesis and correspond to bootstrap (100 replications) samples of individuals within districts. * p<0.1 ** p<0.05 *** p<0.01.