

Heterogeneous and Uncertain Health Dynamics and Working Decisions of Older Adults

Angela Denis
Bank of Spain

EEA-ESEM Conference 2022

The opinions and analysis do not necessarily coincide with the opinions and analysis of the Banco de España or the Eurosystem

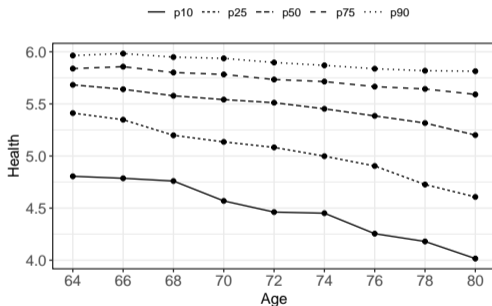
Motivation

- Population aging: number older people out of labor force per worker is rising (OECD, 2019)
 - 42 per 100 workers in 2018
 - 58 per 100 workers in 2050
- Evidence of health effects on older adults' working choices
 - Negative health shocks lead to early retirement (Kerkhofs and Lindeboom, 1997; Bound et al, 1999; Disney et al, 2006; French, 2005)
 - Changes in health affect retirement expectations of workers (McGarry, 2004)
- Mostly ignored: heterogeneity at which health deteriorates with age

Motivation

Heterogeneous health dynamics

Figure: Health percentiles with age from the Health and Retirement Study



- In my model, I find some of this variation is **individual heterogeneity** in health profiles

Research questions

- Goals:

1. To document **heterogeneity** of health profiles with age
2. To measure individuals' **information** about their own health profiles
3. To study its effects on **working decisions** of older adults
4. To measure the effect of **information** from blood-base biomarkers

Data

- Health and Retirement Study (HRS)
 - Longitudinal data, collected every 2 years, running since 1992
 - Representative of individuals 50 years and older in the US
 - Includes measures of health, survival expectations, labor supply
- This analysis uses 9 waves, 1998-2014
- Construct health h_{it} by Confirmatory Factor Analysis using 11 measures
 - Better health is characterized by larger values of h_{it}
 - A decrease of 1 unit in h_{it} corresponds to one extra chronic condition

measures

Step 1: heterogeneous health dynamics

Empirical strategy

- Estimate dynamic model for health with **heterogeneous** levels and slopes

$$h_{it} = \rho h_{it-1} + \alpha_i + \delta_i \cdot t + \epsilon_{it}, \quad t \text{ denotes age, } \epsilon_{it} \sim N$$

Step 1: heterogeneous health dynamics

Empirical strategy

- Estimate dynamic model for health with **heterogeneous** levels and slopes

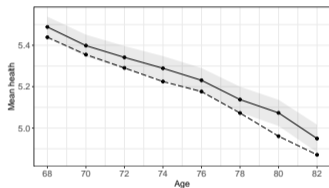
$$h_{it} = \rho h_{it-1} + \alpha_i + \delta_i \cdot t + \epsilon_{it}, \quad t \text{ denotes age, } \epsilon_{it} \sim N$$

- Heterogeneity (α_i, δ_i) normally distributed conditional on h_{i0} (at age 50)
- Health shocks ϵ_{it} iid normally distributed
- Includes other strictly exogenous regressors
- Survival equation to control for selection $S(h_{it-1})$
- Random coefficient model estimated by MLE

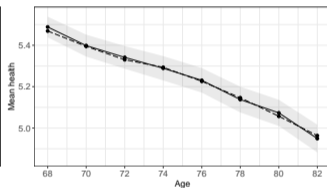
Step 1: heterogeneous health dynamics

Fit under different assumptions

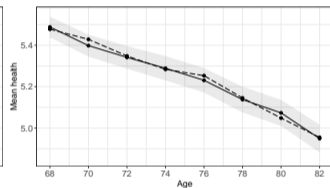
Figure: Mean of health with age
(solid lines: data; dotted lines: predicted values)



(a) Heterogeneous slopes without survival equation



(b) Heterogeneous slopes and survival equation



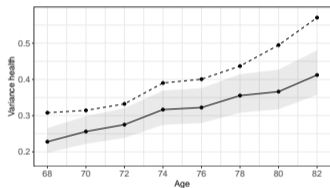
(c) Homogeneous slopes and survival equation

MLE results

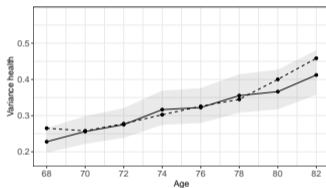
Step 1: heterogeneous health dynamics

Fit under different assumptions

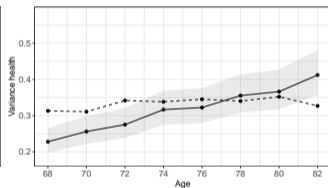
Figure: Variance of health with age
(solid lines: data; dotted lines: predicted values)



(a) Heterogeneous slopes without survival equation



(b) Heterogeneous slopes and survival equation



(c) Homogeneous slopes and survival equation

Step 2: uncertainty about own health dynamics with age

Model

- Unknown slope δ_i and unobserved and time-varying beliefs
- To study those beliefs, we add structure to the beliefs process

Step 2: uncertainty about own health dynamics with age

Model

- Unknown slope δ_i and unobserved and time-varying beliefs
- To study those beliefs, we add structure to the beliefs process
- Bayesian learning model for unknown slope δ_i
 - Initial beliefs $N(\hat{\delta}_{i0}, \hat{\sigma}_0^2)$ (at $t = 0$),
 - Initial **bias** $b = \mathbb{E}(\hat{\delta}_{i0} - \delta_i)$
 - Initial **uncertainty** $\lambda = \frac{\hat{\sigma}_0}{\sigma_\delta}$
 - Health h_{it} signals δ_i over time
 - Posterior beliefs $N(\hat{\delta}_{it}, \hat{\sigma}_t^2)$ with recursive updating equations

equations

Step 2: uncertainty about own health dynamics with age

Empirical Strategy

- For identification, use *Subjective Survival Expectations*
 - What is the percentage chance you will live to be (80, 85, 90, 95 or 100) or more? (*plive10*)
- From the model, survival expectations depend on beliefs about future health

$$\widehat{plive10}_{it} = f_S(h_{it}, \hat{\delta}_{it}, \hat{\sigma}_t^2, \alpha_i)$$

where beliefs $(\hat{\delta}_{it}, \hat{\sigma}_t^2)$ depend on initial **bias b** and **uncertainty λ**

descriptive

Step 2: uncertainty about own health dynamics with age

Results

- Use simulated method of moments to estimate **bias b** and **uncertainty λ**
- Allow for non-classical measurement error
- Results:
 - **bias $b = -0.061 < 0$** implies **worse** beliefs about future health and **less** expected survival on average
 - **$\lambda = 0.338 > 0$** is evidence of incomplete information
 - Large measurement error with mean $\mu_{\text{error}} = 0.121$ and standard deviation $\sigma_{\text{error}} = 0.177$
- Results are robust to rounding

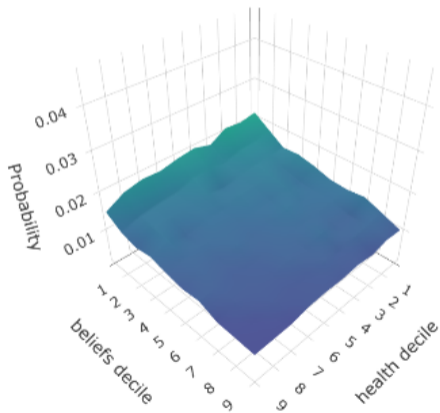
Step 3. Working decisions

Empirical Strategy

- In any model, the working decision rule p_{it} is a function of the information set at that point, Ω_{it-1} .
- When there is heterogeneity in the health process and incomplete information, individuals beliefs $(\hat{\delta}_{it-1}, \hat{\sigma}_{t-1})$ belong to that set.
- A probit exercise shows that beliefs $\hat{\delta}_{it-1}$ do matter
 - Larger $\hat{\delta}_{it-1}$ (better expected health) implies larger probabilities of work
 - However, probit results assume a linear index and could be misspecified
- Instead, want to estimate this probability flexibly
 - Take advantage of neural networks for flexible estimation
 - Beliefs are unobserved to the econometrician
 - To deal with them, use an iterative approach based on EM algorithm

Step 3: working decisions

Working individuals who believe their health will deteriorate more slowly have larger probabilities of working next period



- z-axis is $\mathbb{E}\left(\frac{\partial \mathbb{P}(p_{it}=1)}{\partial \hat{\delta}_{it-1}}\right)$
- x-axis deciles of health h_{it-1}
- y-axis deciles of expected beliefs $\hat{\delta}_{it-1}$
- $age_{it} \in [52, 59]$
- Avg probability 80-90 pp

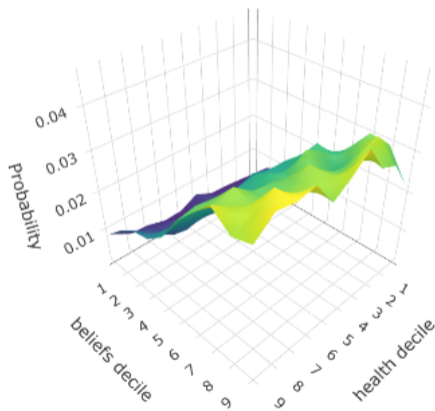
mg effect of $\hat{\delta}_{it}$

mg effect of h_{it}

IRF

Step 3: working decisions

Non-linear effects of beliefs for younger older adults who already stopped working



- z-axis is $\mathbb{E}\left(\frac{\partial \mathbb{P}(p_{it}=1)}{\partial \hat{\delta}_{it-1}}\right)$
- x-axis deciles of health h_{it-1}
- y-axis deciles of expected beliefs $\hat{\delta}_{it-1}$
- $age_{it} \in [52, 59]$
- Avg probability 10-30 pp

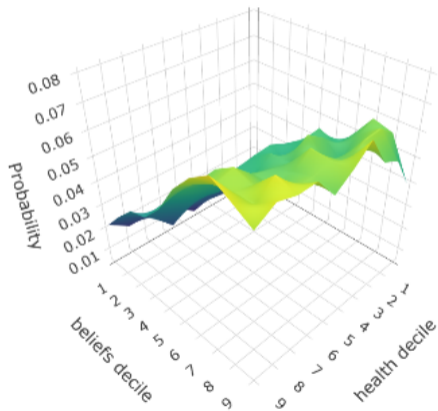
mg effect of $\hat{\delta}_{it}$

mg effect of h_{it}

IRF

Step 3: working decisions

Interaction effects for younger older adults not working



- z-axis is $\mathbb{E}\left(\frac{\partial \mathbb{P}(p_{it}=1)}{\partial h_{it-1}}\right)$
- x-axis deciles of health h_{it-1}
- y-axis deciles of expected beliefs $\hat{\delta}_{it-1}$
- $age_{it} \in [52, 59]$
- Avg probability 10-30 pp

mg effect of $\hat{\delta}_{it}$

mg effect of h_{it}

IRF

Step 4: information experiment

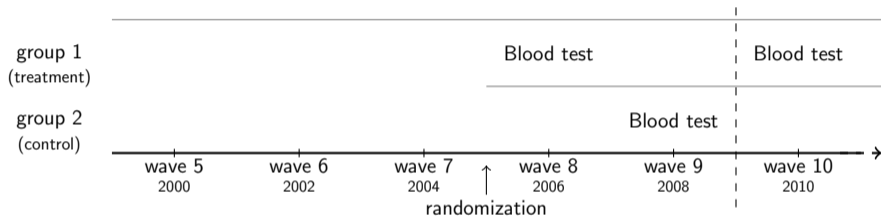
Biomarkers as signals of δ_i

- So far, results show
 - Beliefs matter for working decisions
 - Beliefs are biased
 - Health is a weak signal
- Can we provide **information** to correct beliefs? And affect working decisions?
- Blood-based biomarkers introduced in 2006
 - Some results are informed back: blood glucose, HDL and total cholesterol
These results provide *information about health*
 - **Info** collected and provided to a random half of the sample, every other wave
Hence, we have *exogenous source of variation*

Step 4: information experiment

Collection of biomarkers

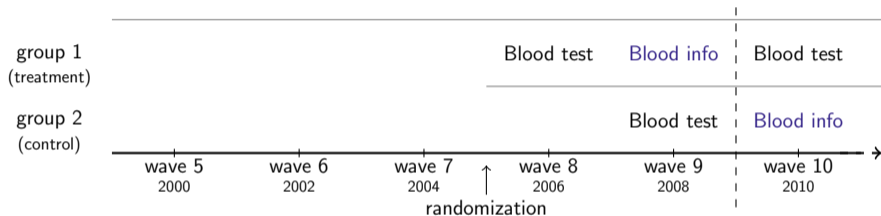
Figure: Timing of the biomarker collection and information experiment



Step 4: information experiment

Collection of biomarkers

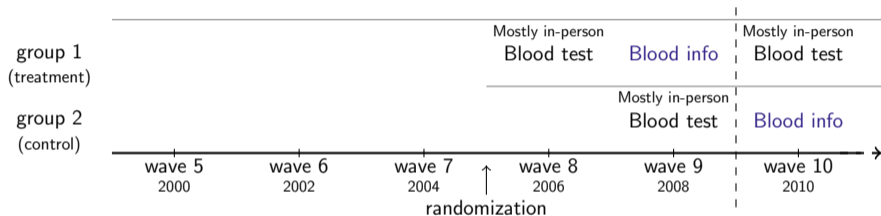
Figure: Timing of the biomarker collection and information experiment



Step 4: information experiment

Collection of biomarkers

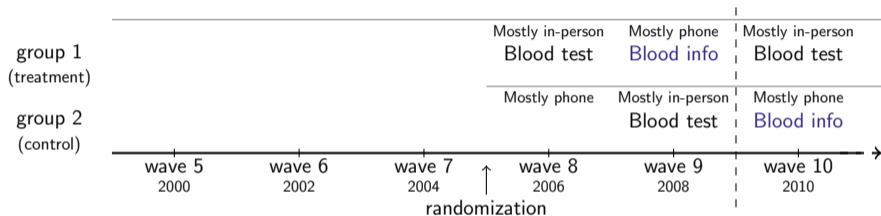
Figure: Timing of the biomarker collection and information experiment



Step 4: information experiment

Collection of biomarkers

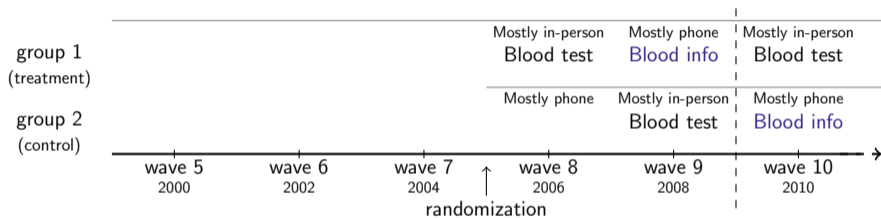
Figure: Timing of the biomarker collection and information experiment



Step 4: information experiment

Collection of biomarkers

Figure: Timing of the biomarker collection and information experiment

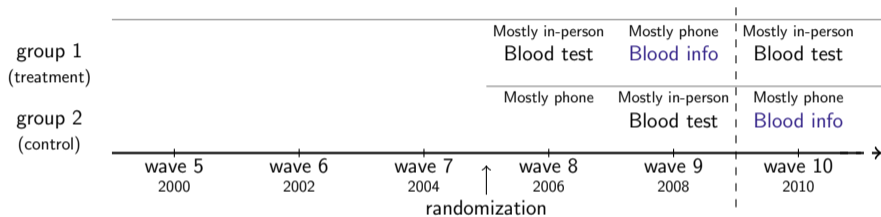


- DD waves 7 and 8: mode collection effects (in-person)
- DD waves 7 and 9: information effect - mode collection effects (in-person)

Step 4: information experiment

Collection of biomarkers

Figure: Timing of the biomarker collection and information experiment



- DD waves 7 and 8: mode collection effects (in-person)
- DD waves 7 and 9: information effect - mode collection effects (in-person)
- Two variables:
 - Survival expectations *plive10* i.e. effects on beliefs
 - Working decision *p* i.e. effects on outcomes

Step 4: information experiment

Biomarker results from a data perspective

- Overall results
 - Survival expectations *plive10*: 1.36 pp not significant
 - Working decision *p*: 0.02 pp not significant
- Larger effects for college graduates
 - Survival expectations *plive10*: 5.12 pp significant at 5%
 - Working decision *p*: 0.04 pp not significant

DD results

DD bad results

Summary

- Evidence of **heterogeneity** in health dynamics
- Individuals are **uncertain** and have **negatively biased** in beliefs about health changes with age
- **Expecting** a worse health profile is associated with **lower probability of work**, in particular, for younger adults (50s) not working
- Eliminating initial bias in beliefs would **increase participation** by more than 2 pp
- **Cholesterol and glucose information** has small effects on expectations, but no work effects

Thank you!

Appendix

Data and preliminaries

Health measures

- Chronic conditions: high blood pressure, heart attack, diabetes, stroke, lung disease, arthritis, cancer
- Self reported health: excellent, very good, good, fair, poor
- Body mass index
- Eyesight in general, at a distance, and up close: excellent, very good, good, fair, poor and legally blind
- Hearing: excellent, ... poor
- Pain: no pain, mild, moderate and severe pain
- ADLs mobility: walk 1 block, several blocks, across room, climb 1 flight of stairs, several flight of stairs
- ADLs large muscles: push or pull large object, sit for 2 hours, get up from chair, stoop kneel or crouch
- Other ADLs: carry 10 lbs, reach arms

Data and preliminaries

Confirmatory Factor Analysis results

Measure of health	Intercept	Loading	R-squared
Number of chronic conditions ^(a)	0	1	0.29
Self-assessed health	8.188	-1.027	0.44
Body mass index	37.278	-1.812	0.05
Eyesight in general	5.710	-0.549	0.15
Eyesight at a distance	5.177	-0.502	0.13
Eyesight up close	5.465	-0.523	0.13
Hearing	4.830	-0.424	0.08
Pain	4.792	-0.802	0.36
Difficulties in ADLs regarding mobility	9.398	-1.598	0.64
Difficulties in ADLs of large muscles	8.964	-1.475	0.63
Difficulties in other ADLs	3.812	-0.654	0.50

Note: (a) The first measure corresponds to 7 minus the number of chronic conditions, hence, larger values represent better health. For this variable, the intercept and loading are fixed to 0 and 1, respectively. All other coefficients are significant at 1%.

Step 1: heterogeneous health dynamics

MLE results on health and survival

	Symbol	Coefficient	Pvalue
Persistence	ρ	0.223	0.000
Mean* of α_i	μ_α	0.955	0.000
Mean* of δ_i	μ_δ	-0.057	0.018
SD of α_i	σ_α	0.235	0.000
SD of δ_i	σ_δ	0.043	0.000
$Corr(\alpha_i, \delta_i)$	ϕ	-0.033	0.714
SD of health shocks	σ_ϵ	0.266	0.000
Survival dependence on health	γ	0.583	0.001
Controls		Yes	
N alive observations		8,901	
N dead observations		112	
N individuals		1,671	
-Log likelihood		3,027.6	

Hence, evidence of **slope heterogeneity**

[back](#)

Step 1: heterogeneous health dynamics

MLE results: health equation

[back](#)

	Heterogeneous slopes without survival eq		Heterogeneous slopes with survival eq		Homogeneous slopes with survival eq	
	Coefficient (1)	Pvalue (2)	Coefficient (3)	Pvalue (4)	Coefficient (5)	Pvalue (6)
ρ	0.225	0.000	0.223	0.000	0.366	0.000
τ	0.001	0.087	0.001	0.119	0.001	0.108
μ_α	0.968	0.000	0.955	0.000	0.781	0.000
$\nu_{\alpha female}$	-0.029	0.132	-0.029	0.131	-0.024	0.163
$\nu_{\alpha white}$	0.026	0.338	0.027	0.335	0.018	0.458
$\nu_{\alpha hispanic}$	0.004	0.909	0.005	0.889	-0.001	0.973
$\nu_{\alpha less_HS}$	-0.134	0.000	-0.134	0.000	-0.120	0.000
ω_α	0.599	0.000	0.603	0.000	0.492	0.000
μ_δ	-0.060	0.012	-0.057	0.018	-0.051	0.000
$\nu_{\delta female}$	0.006	0.146	0.006	0.136	0.005	0.198
$\nu_{\delta white}$	0.015	0.007	0.015	0.008	0.013	0.011
$\nu_{\delta hispanic}$	0.010	0.196	0.010	0.199	0.006	0.390
$\nu_{\delta less_HS}$	-0.003	0.677	-0.003	0.624	0.001	0.896
ω_δ	0.000	0.956	0.000	0.962		
σ_α	0.235	0.000	0.235	0.000	0.212	0.000
σ_δ	0.042	0.000	0.043	0.000		
ϕ	-0.030	0.741	-0.033	0.714		
σ_ϵ	0.266	0.000	0.266	0.000	0.285	0.000

Step 1: heterogeneous health dynamics

MLE results: survival equation

[back](#)

	Heterogeneous slopes without survival eq		Heterogeneous slopes with survival eq		Homogeneous slopes with survival eq	
	Coefficient (1)	Pvalue (2)	Coefficient (3)	Pvalue (4)	Coefficient (5)	Pvalue (6)
γ			0.583	0.001	0.640	0.000
ι_1			-0.277	0.334	-0.422	0.125
ι_2			0.044	0.986		
ι_3			0.029	0.306	0.036	0.287
ι_4			0.241	0.601		
θ_0			0.529	0.326	0.514	0.336
θ_1			-0.178	0.136	-0.193	0.092
$\theta_{2female}$			0.259	0.002	0.255	0.002
θ_{2white}			0.019	0.847	0.029	0.758
$\theta_{2hispanic}$			0.317	0.079	0.311	0.078
θ_{2less_HS}			-0.106	0.305	-0.114	0.267
N alive observations	8,901		8,901		8,901	
N dead observations	0		112		112	
N individuals	1,671		1,671		1,671	
-LL	2,498.6		3,027.6		3,067.6	

Step 2: uncertainty about own health dynamics with age

Bayes' updating equations

Posterior variance

$$\frac{1}{\hat{\sigma}_t^2} = \frac{1}{\hat{\sigma}_{t-1}^2} + \frac{t^2}{\sigma_\epsilon^2}$$

Posterior mean

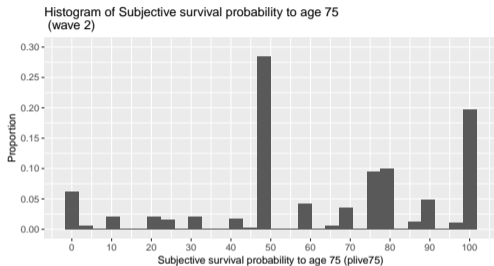
$$\begin{aligned}\frac{\hat{\delta}_{it}}{\hat{\sigma}_t^2} &= \frac{\hat{\delta}_{it-1}}{\hat{\sigma}_{t-1}^2} + \frac{(h_{it} - \rho h_{it-1} - \alpha_i)t}{\sigma_\epsilon^2} \\ \Leftrightarrow \hat{\delta}_{it} &= \hat{\delta}_{it-1} + K_t(\lambda, \sigma_\epsilon^2) \cdot \hat{\zeta}_{it}\end{aligned}$$

where

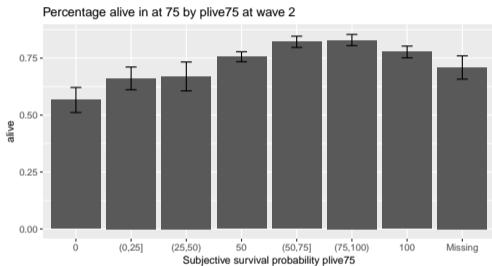
- $\hat{\zeta}_{it}$ is the perceived innovation in health, $\hat{\zeta}_{it} \equiv h_{it} - \mathbb{E}(h_{it} | \Omega_{it-1})$
- $K_t(\lambda = 0, \sigma_\epsilon^2) = 0$, $\frac{\partial K_t}{\partial \lambda} > 0$, and $\frac{\partial K_t}{\partial \sigma_\epsilon^2} < 0$

Step 2: uncertainty about own health dynamics with age

Subjective survival probabilities in the HRS



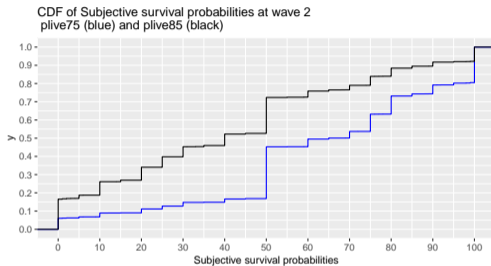
(a) Histogram of plive75 (wave 2, age ≤ 65)



(b) Percentage alive at 75 by plive75 at wave 2

Step 2: uncertainty about own health dynamics with age

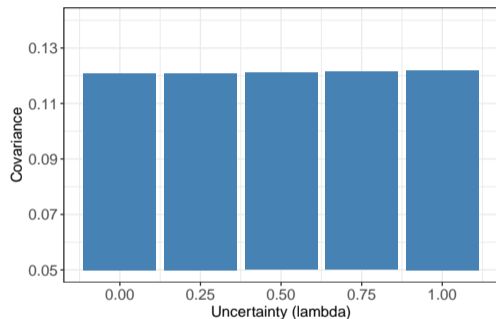
Subjective survival probabilities in the HRS (cont.)



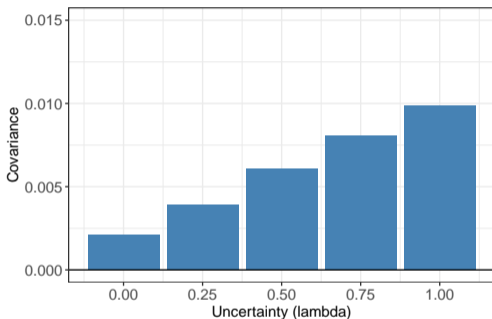
(a) Cumulative distribution of plive75 and plive85 (wave 2, $age \leq 75$)

Step 2: uncertainty about own health dynamics with age

Simulated covariance moments of Survival Expectations as function of uncertainty λ



(a) $Cov(plive_{10}, h)$

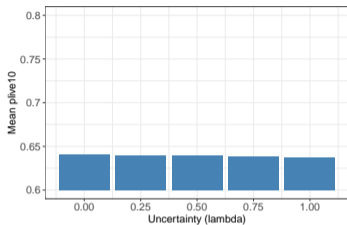


(b) $Cov(\Delta plive_{10}, \Delta h)$

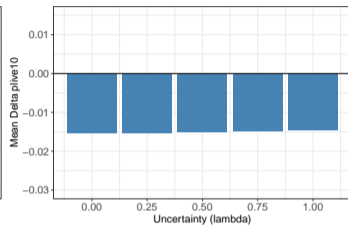
Step 2: uncertainty about own health dynamics with age

Simulated moments of Survival Expectations as function of uncertainty λ

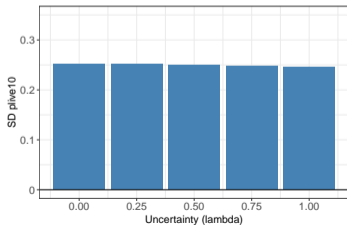
[back](#)



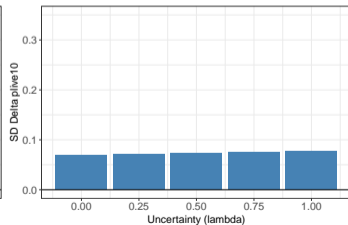
(a) Mean *plive*10



(b) Mean Δ *plive*10



(c) SD *plive*10



(d) SD Δ *plive*10

Step 2: uncertainty about own health dynamics with age

Identification with subjective **survival rates**

We could identify λ with panel data on expectations about **survival rates**

$$\begin{aligned}bsr_{it} &= \mathbb{P}(S_{it+3} = 1 | S_{it+2} = 1, \Omega_{it}) \\bsr_{it+1} &= \mathbb{P}(S_{it+3} = 1 | S_{it+2} = 1, \Omega_{it+1})\end{aligned}$$

Then,

$$\Delta_w \Phi^{-1} bsr_{it+1} = \underbrace{\rho(h_{it+1} - \rho h_{it} - \alpha_i - \hat{\delta}_{it}(t+1))}_{\text{due to persistence } \rho} + \underbrace{(t+2)(\hat{\delta}_{it+1} - \hat{\delta}_{it})}_{\text{due to learning } \lambda}$$

And

$$\Rightarrow Cov(\Delta_w \Phi^{-1} bsr_{it+1}, \Delta h_{it+1}) = C_t(\lambda) \cdot Var(\Delta h_{it+1})$$

where $C_t(\lambda)$ is increasing in λ [back](#)

Step 2: uncertainty about own health dynamics with age

Results

	Symbol	Coefficient	Lower bound	Upper bound
Bias	b	-0.061	-0.061	-0.060
Uncertainty	λ	0.338	0.336	0.340
Mean of measurement error	μ_{merror}	0.121	0.118	0.123
SD of measurement error	σ_{merror}	0.177	0.176	0.177

Note: The simulation includes non-classical measurement error $\nu_{it} \sim N(\mu_{merror}, \sigma_{merror}^2)$ with observed values are $\max\{\min\{plive10_{it} + \nu_{it}, 1\}, 0\}$. Standard errors clustered at the individual level

[back](#)

Step 2: uncertainty about own health dynamics with age

SMM fit

≈ Target moments

	Data moment	SE	Simulated moment
$\mathbb{E}(plive10)$	0.531	(0.00011)	0.538
$\mathbb{E}(plive10^2)$	0.371	(0.00012)	0.357
$\mathbb{E}(plive10 \cdot h)$	2.890	(0.00065)	2.957
$\mathbb{E}(\Delta plive10)$	-0.013	(0.00002)	-0.014
$\mathbb{E}((\Delta plive10)^2)$	0.070	(0.00003)	0.066
$\mathbb{E}(\Delta plive10 \Delta h)$	0.007	(0.00002)	0.007

Note: same sample used for estimation

Other moments

	Data moment	SE	Simulated moment
$\mathbb{E}(plive75)$	0.702	(0.00017)	0.806
$\mathbb{E}(plive75^2)$	0.556	(0.00021)	0.687
$\mathbb{E}(plive75 \cdot h)$	3.886	(0.00101)	4.469
$\mathbb{E}(\Delta plive75)$	-0.001	(0.00010)	0.018
$\mathbb{E}((\Delta plive75)^2)$	0.054	(0.00008)	0.042
$\mathbb{E}(\Delta plive75 \Delta h)$	0.006	(0.00005)	0.003

Note: subsample used for estimation that is also under 65 years old, $N = 1,247$ individuals

Step 3: working decisions

In a model with heterogeneous and uncertain health dynamics

p_{it} labor participation, c_{it} consumption

$$V_t(\Omega_{it-1}) = \max_{p_{it}, c_{it}} \left\{ \mathbb{E} \left(\overbrace{U(p_{it}, c_{it}, h_{it}, p_{it-1})}^{\text{flow utility}} \middle| \Omega_{it-1} \right) + \right. \\ \left. \beta \mathbb{E} \left(\underbrace{S_{it+1}}_{\text{survival}} V_{t+1}(\Omega_{it}) + (1 - S_{it+1}) \underbrace{B(a_{it})}_{\text{bequest}} \middle| \Omega_{it-1}, p_{it}, c_{it} \right) \right\}$$

st.

- Budget constraint, with assets $a_{it} = a(\Omega_{it-1}, p_{it}, c_{it}, h_{it}, w_{it})$

- Health process $h_{it} = \rho h_{it-1} + \alpha_i + \delta_i \cdot t + \epsilon_{it}$

heterogeneity

- Beliefs about δ_i following $N(\hat{\delta}_{it}, \hat{\sigma}_t^2)$
defined by updating equations

incomplete information

Step 3: working decisions

In a model with heterogeneous and uncertain health dynamics

Information set

$$\Omega_{it-1} = \{t, p_{it-1}, a_{it-1}, w_{it-1}, h_{it-1}, \hat{\delta}_{it-1}, \hat{\sigma}_{t-1}^2, \alpha_i\}$$

Policy rule for working decision

$$p_{it} = p(t, p_{it-1}, a_{it-1}, w_{it-1}, h_{it-1}, \hat{\delta}_{it-1}, \hat{\sigma}_{t-1}^2, \alpha_i)$$

- Survival expectations $plive10_{it}$ help us identify $\hat{\delta}_{it}$ and $\hat{\sigma}_t^2$
- Conditional on Ω_{it-1} , $plive10_{it}$ do not play a role on decisions p_{it}

Step 3: working decisions

Probit results on $\mathbb{P}(p_{it} = 1|\Omega_{it-1})$

[back](#)

		(1)		(2)		(3)	
		coeff	se	coeff	se	coeff	se
age	t	-0.20***	(0.016)	-0.08***	(0.003)	-0.19***	(0.016)
lagged work	p_{it-1}	2.03***	(0.018)	2.03***	(0.019)	2.03***	(0.019)
lagged health	h_{it-1}	0.17***	(0.024)	0.26***	(0.033)	0.18***	(0.046)
heterogeneous intercept	α_i	0.24***	(0.036)	0.07	(0.046)	0.24***	(0.075)
beliefs mean	$\hat{\delta}_{it-1}$	1.93***	(0.249)			1.90***	(0.499)
beliefs var	$\hat{\sigma}_{t-1}^2/\sigma_{\delta}^2$	-13.85***	(2.048)			-13.33***	(2.102)
survival expectations	$plive10_{it}$			0.11***	(0.031)	0.01	(0.043)
Controls	other vars Ω_{it-1}	Yes		Yes		Yes	
N individuals		14,969		14,718		14,718	
N observations		58,040		55,592		55,592	

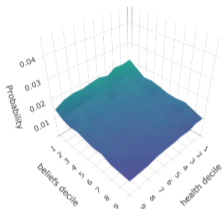
Note: Standard errors are clustered at the individual level.*** $p < 0.01$, ** $p < 0.05$, * $p < 0.1$

- Beliefs are unobserved to econometrician and hence are integrated out
- Beliefs matter: larger $\hat{\delta}_{it}$ implies larger probabilities of work
- Survival expectations $plive10_{it}$ do not matter once we control for beliefs

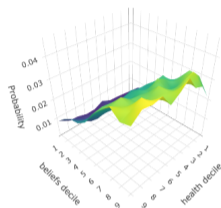
Step 3: working decisions

NN results: average marginal effects of beliefs $\hat{\delta}_{it-1}$ on labor participation p_{it}

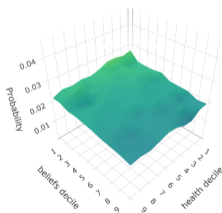
[back](#)



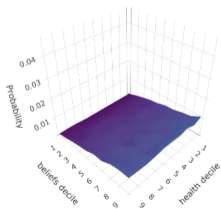
(a) $p_{it-1} = 1$ and $age_{it} \in [52, 59]$



(b) $p_{it-1} = 0$ and $age_{it} \in [52, 59]$



(c) $p_{it-1} = 1$ and $age_{it} \in [66, 75]$

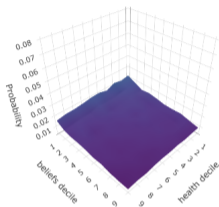


(d) $p_{it-1} = 0$ and $age_{it} \in [66, 75]$

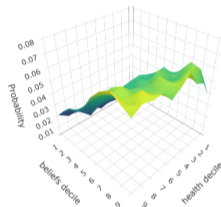
Step 3: working decisions

NN results: average marginal effects of health h_{it-1} on labor participation p_{it}

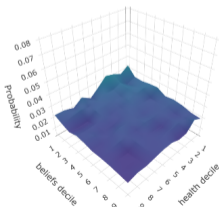
[back](#)



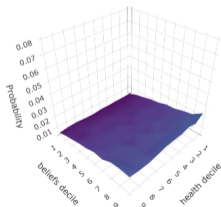
(a) $p_{it-1} = 1$ and $age_{it} \in [52, 59]$



(b) $p_{it-1} = 0$ and $age_{it} \in [52, 59]$



(c) $p_{it-1} = 1$ and $age_{it} \in [66, 75]$



(d) $p_{it-1} = 0$ and $age_{it} \in [66, 75]$

Step 3: working decisions

Result: Eliminating bias in beliefs would **increase** probability of work

(2) Effect of eliminating initial negative bias b on $\mathbb{P}(p_{it} = 1 | \Omega_{it-1})$

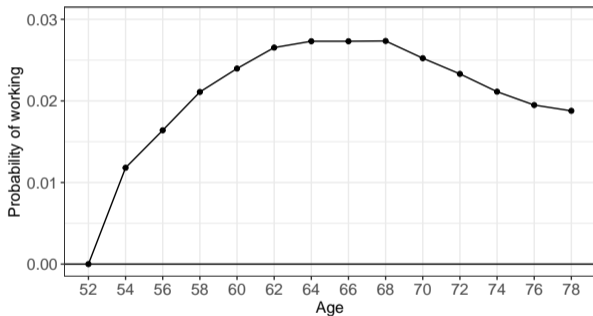


Figure: Impulse response function to eliminate initial bias b

Step 3: working decisions

NN impulse response functions to a reduction in bias $\hat{\delta}_{it} - \delta_i$

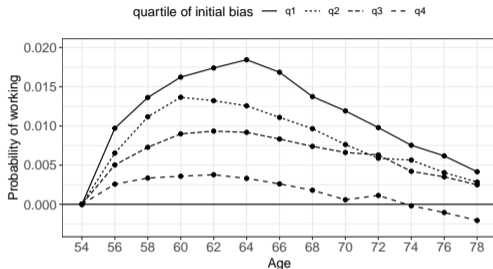


Figure: Bias reduced in half, by quartile of bias

At 54, p_{it} has mean 0.73 and sd 0.44

At 66, p_{it} has mean 0.34 and sd 0.47

At 78, p_{it} has mean 0.11 and sd 0.31

Bias at 54 goes between -0.16 to 0.12, with a mean and median of -0.059

[back](#)

Step 4: information experiment

DD results

		Survival expectations ($plive10_{iw}$)			Work choice (p_{iw})		
		All	Less college	College	All	Less college	College
group 1	d_{g_i}	-0.47	-0.24	-1.38	0.00	0.01	-0.01
wave 6	d_{w6}	-1.42***	-1.21**	-2.09**	-0.07***	-0.07***	-0.09***
wave 7	d_{w7}	-1.50***	-1.44***	-1.72**	-0.12***	-0.12***	-0.12***
wave 8	d_{w8}	-6.41***	-6.12***	-7.37***	-0.16***	-0.16***	-0.19***
wave 9	d_{w9}	-3.57***	-3.22***	-4.70***	-0.20***	-0.20***	-0.22***
group 1, wave 6	$d_{g_i} \cdot d_{w6}$	0.28	-0.06	1.37	0.01	0.00	0.02
group 1, wave 7	$d_{g_i} \cdot d_{w7}$	-0.27	-0.24	-0.33	0.01	0.01	0.01
group 1, wave 8	$d_{g_i} \cdot d_{w8}$ (a)	1.77**	1.29	3.31***	0.01	0.00	0.03
group 1, wave 9	$d_{g_i} \cdot d_{w9}$ (b)	-0.42	-1.12	1.82	0.01	0.01	0.00
Constant		53.97***	52.42***	58.96***	0.49***	0.45***	0.61***
Observations		41,930	31,815	10,115	41,923	31,810	10,113
R-squared		0.004	0.004	0.005	0.021	0.021	0.022
Interview mode effect (a)		1.77**	1.29	3.31**	0.01	0.00	0.03
Information effect (a)+(b)		1.36	1.65	5.12**	0.02	0.01	0.04

$$y_{iw} = \beta_0 + \beta_1 d_{g_i} + \beta_2 d_w + \beta_3 d_{g_i} \cdot d_w + \epsilon_{iw}$$

Step 4: biomarkers as signals of δ_i

Reduced-form results distinguishing bad vs good test results

[back](#)

		Survival expectations $plive10_{iw}$	Working decisions p_{iw}
group 1	d_{g_i}	-0.39	-0.01
group 1, bad results	d_{b_i}	-0.37	0.04**
wave 6	d_{w6}	-1.42***	-0.07***
wave 7	d_{w7}	-1.50***	-0.12***
wave 8	d_{w8}	-6.41***	-0.16***
wave 9	d_{w9}	-3.57***	-0.20***
group 1, wave 6	$d_{g_i} \cdot d_{w6}$	0.58	0.01
group 1, wave 7	$d_{g_i} \cdot d_{w7}$	0.15	0.02*
group 1, wave 8	$d_{g_i} \cdot d_{w8}$	2.23***	0.02*
group 1, wave 9	$d_{g_i} \cdot d_{w9}$	-0.05	0.02
group 1, bad results, wave 6	$d_{g_i} \cdot d_{b_i} \cdot d_{w6}$	-1.25	-0.01
group 1, bad results, wave 7	$d_{g_i} \cdot d_{b_i} \cdot d_{w7}$	-1.75*	-0.04**
group 1, bad results, wave 8	$d_{g_i} \cdot d_{b_i} \cdot d_{w8}$	-1.94*	-0.05***
group 1, bad results, wave 9	$d_{g_i} \cdot d_{b_i} \cdot d_{w9}$	-1.56	-0.03
Constant		53.97***	0.49***
Observations		41,930	41,923
% of group 1 individuals with bad results		12.29	12.30