

# Old-Age Pension Outcomes

October 2022

## 1 Introduction

This document details the outcomes we will consider. We will estimate both reduced form and IV effects on these outcomes. Our regressions will include strata fixed effects and covariates selected via post-double selection Lasso. Based on the effects we find on these outcomes, we will do complementary analyses to understand channels driving the effects.

## 2 Primary Outcomes, Part 1: Financial Impacts on the Household

### 2.1 Self-rated financial status

*Outcome:* Financial status on a scale of 1-10.

*Details:*

- Response provided by the household respondent.
- Households rated their current financial status on a scale of 1-10, where 1 was “extremely difficult financial situation” and 10 was “extremely comfortable financial situation.”
- Households that responded they did not know were left as missing.

### 2.2 Household Size

*Outcome:* Number of people living in the household.

*Details:*

- Responses given by household respondents.
- Household respondents were asked the number of people living in the household.

### 2.3 Consumption

*Outcome:* Monthly per capita household consumption in Rupees.

*Details:*

- Response provided by the household respondent.

- Households were asked "How much did your household spend on consuming the following items over the last 30 days?" about the following items: rice, wheat, ragi, other cereals, lentils, other pulses and pulse products, milk, milk products, edible oil and vanaspati, vegetables, fruits and nuts, eggs fish and meat, sugar, salt and spices, other food items, pan tobacco and intoxicants, fuel and light, entertainment, personal care and effects, toilet articles, sundry articles, consumer services, conveyance, rent, consumer taxes and cesses, medical expenses, medical\*, tuition and fees\*, school books\*, clothing and bedding\*, footwear\*, furniture and fixtures\*, crockery and utensils\*, cooking and household appliances\*, good for recreation\*, jewelry and ornaments\*, personal transport equipment\*, therapeutic appliances\*, other personal goods\*, repair and maintenance\*. Expenses with a star were asked on an annual basis and were divided by 12 to create the monthly figure. Outcome is the value in rupees of monthly per capita consumption.

## 2.4 Support from Family

*Outcome:* Index of family support.

*Details:*

- Responses given by household respondents, elders and proxies.
- An index for family support was created from the questions: Did the household receive help worth more than Rs. 500 to relatives who do not live under this roof including those who died within the last 12 months?, In the past 2 months, have you usually gotten food and supplies for yourself or have others usually gotten them for you? (proxy responses merged), Are you usually supported by any family members (financially or non-financially)? (proxy responses merged).
- For the household receiving help worth more than Rs. 500 and elder supported by any family members questions, responses of don't know and refusals coded as 0. For collecting supplies, "other" responses coded as 1.

## 2.5 Support to Family

*Outcome:* Send help worth more than Rs. 500

*Details:*

- Responses given by household respondents.
- Household respondents were asked: Did the household send help worth more than Rs. 500 to relatives who do not live under this roof including those who died within the last 12 months?
- Responses of don't know and refusals coded as 0.

# 3 Primary Outcomes, Part 2: Elder Welfare Impacts

## 3.1 Food Security

*Outcome:* In the last 2 months, has the elder cut or skipped a meal because there were not enough resources for food?

*Details:*

- Responses given by elders and proxies.

- Elders are asked to report if they had to skip or cut the size of meals in the last 2 months. Outcome is an indicator for if the elder cut or skipped a meal.
- Elders refused to answer or did not know and were coded as not cutting or skipping a meal.

### 3.2 Measured Health

*Outcome:* Index of indicators from health measurements.

*Details:*

- Responses measured at health camp.
- An index for measured health was created from indicators for if the elder's has high blood sugar (HbA1c greater than or equal to 6.5), has high blood pressure (diastolic reading greater than or equal to 90 or a systolic reading greater than or equal to 140), and has low hemoglobin levels (women with an Hb % lower than 12 and men with an Hb % lower than 13)
- Responses missing for elders who did not attend a health camp. Elders who attended the health camp did not have blood drawn or sample clotted will also remain missing.

### 3.3 Activities of Daily Living

*Outcome:* Percent of Activities Deficient.

*Details:*

- Responses given by elders and proxies.
- Elders were asked to rate how much difficulty they have with daily living tasks on a scale of none/mild/moderate/severe/extreme in the last 30 days using the World Health Organization Disability Assessment Schedule (WHODAS) 2.0, 12-item version. Answers to each question are summed to give a score out of 48. Questions include standing for long periods, washing your whole body, getting dressed, taking care of your household responsibilities, walking a long distance such as a kilometer, concentrating on doing something for 10 minutes, learning a new task, joining in community activities, your day to day work, dealing with people you do not know, maintaining a friendship, and being affected emotionally by health problems.
- If there four or fewer missing responses for elders and three or fewer missing responses for elders with proxies, missing responses are computed using non-missing average.

### 3.4 Elder Wellbeing

*Outcome:* Index of elder's depression score, cognition score, and self-reported pain.

*Details:*

- Responses given by elders.
- Depression is measured using the Geriatric Depression Scale, short form. Participants are asked yes/no questions: if they are satisfied with their lives, have dropped activities and interests, feel their life is empty, often get bored, in good spirits most of the time, afraid that something bad is going to happen to them, feel happy most of the time, often feel hopeless, prefer to stay at home, rather than going out and doing new things, have problems with memory, think it is wonderful to

be alive, feel worthless, feel full of energy, feel lonely. Elder's depression is scored out of 15. To measure cognition, we use the elder's score on the Hindi Mini-Mental State Exam. Elder's cognition is scored out of 30. Elders were asked in the last week how much physical pain they have been in where 0 is "no pain" and 10 is "worst pain possible."

- Proxies were not given any of the questions in the index. Elders needing a proxy due to mental limitations and was given the HMSE questionnaire and has a score. Elders who had 5 or fewer missing responses in the GDS had score imputed based on the non-missing average. Elders are missing GDS scores due to having over 5 refusals. Respondents who responded don't know or refused to answer the question about their pain are coded as missing.

### 3.5 Elder Empowerment

*Outcome:* Index of questions related to elder empowerment.

*Details:*

- Responses given by elders.
- Elders were asked if people in their household treat them with respect, if they feel like they make valuable contributions to the lives of their family members, and if their opinion is listened to when their family decides to purchase an expensive item, make a big investment, or decide how much to save. Questions were converted from Likert scales to indicators. If the elder responded often, sometimes, or rarely, they were coded as 1. If elder responded never, not applicable, refused, or don't know, they were coded as 0.
- Proxies were not asked any of the questions in the index. Elders who live alone and responded "not applicable" when asked if they are treated with respect in their household are assigned a missing value for that question and the index for them is an aggregate over the other questions only.

### 3.6 Social Inclusion

*Outcome:* Index of questions related to visits and elder's social activities.

*Details:*

- Responses given by elders and proxies.
- Elders and proxies were asked whether the elder was visited or had visited someone in the last month. Elders were asked how frequently they: attend a public meeting, meet personally with a community leader, work with other people in their neighborhood to fix or improve something, attend cultural performances or shows, talk on the phone with relatives or friends outside the household. Community activity questions were converted from Likert scales to indicators. If the elder responded that they ever participated in the activity, they were coded as 1. If elder responded never, refused, or don't know, they were coded as 0. Proxies were coded as not participating in community activities.

## 4 Secondary Outcomes

### 4.1 Household Labor Income

*Outcome:* Yearly per capita household labor income in Rupees.

*Details:*

- Responses given by household respondents.
- Income for each member of the household from salaries, wages, non-agricultural business, or agriculture and related activities is considered labor income. The survey asked how regularly each household member receives money from each source (i.e., daily, weekly, monthly, yearly, contract based, no specific frequency) and how much money they get on that basis in Rupees. Responses used to arrive at an annual labor income estimate. "Contract basis" and "no specific frequency" were considered to be a one-time annual payment. Labor income was summed across all household members then divided by the number of people living in the household to arrive at a per capita yearly labor income.
- Responses marked as "refused" or "don't know" for the payment schedule or amount were coded as zero.

## 4.2 Time Up and Go

*Outcome:* Time in seconds to complete tug test.

*Details:*

- Responses measured at health camp.
- The time for elder to get up from their chair, walk a predetermined length, turn around, walk back and sit back down was recorded. If elder was unable to complete the task, they were coded at the 99th percentile of the control group.

## 4.3 Endurance Test

*Outcome:* Endurance test of stands.

*Details:*

- Responses measured at health camp.
- The number of times an elder could stand up unassisted. If elder was unable to complete the task, they were coded as having 0 unassisted stands.

## 4.4 Weight

*Outcome:* Elder's weight.

*Details:*

- Responses measured at health camp.
- Elder's weight recorded.
- Elders were not weighed due to being immobile left as missing.