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And justice for all: Examining corruption as a contextual source of mental illness



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ABSTRACT

In the present study, I focus on the relationship between corruption and mental health as measured by the level of depressive symptoms. I use data collected by the European Social Survey in 2006, 2012 and 2014 from 99,159 individuals that lived in 24 European countries. I employ two types of analyses: static analyses, i.e., multilevel models estimated in each wave, and dynamic analyses, i.e., fixed effects models for pseudo-panel data. Both static and dynamic analyses suggested that corruption had a detrimental effect on mental health. However, the results were not robust in models where the country's wealth was accounted for. Furthermore, this study presents evidence that the level of societal corruption is detrimental especially for the mental health of religious persons and individuals that experience material adversity. Regarding a potentially different effect of corruption on mental health between western and eastern European countries, no significant differences were found.

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1. Introduction

Corruption refers to the private wealth seeking behavior of someone who represents the state or the public authority (Andvig et al., 2001). Under this generic definition several types of corruption coexist: political, economic, and administrative or petty corruption. However, no matter the form that it takes, at least within the context of a democratic society, corruption is seen as a negative, unwanted and dysfunctional characteristic with profound impact both on the economic realm but also on the well-being of the population (Treisman, 2007).

In the present study, I focus on the potential detrimental effect of corruption on mental health, i.e., the emotional dimension of well-being, in a sample of European countries. In the light of the reported differences in terms of corruption levels between European countries, a damaging effect of societal corruption on mental health is a matter of great concern. For instance, a report based on data collected around the beginning of 2013 showed that less than 5 percent of the population living in the western European countries declared to have paid a bribe during the 12 months prior to the data collection, while this percentage was much higher among the eastern and south European countries, e.g. between 20 and 29

percent in Slovakia, Turkey or Greece (Hardoon and Heinrich, 2013). Similar differences were found when ranking the European countries based on perceived levels of corruption (Transparency International, 2014).

Previous studies mostly focused on the relationship between corruption and life satisfaction. For example, Tavits (2008) found that in a sample of European countries the level of corruption was related to lower life satisfaction while Helliwell and Huang (2008) found that a government that is not corrupt is especially important for the life satisfaction of individuals in the poorer countries but not in the rich ones. However, a recent study found that the relationship between corruption and happiness was only significant in the high-income countries (Arvin and Lew, 2014). In relation to mental health, I was able to retrieve only one study that found a significant relationship between being a victim of corrupt acts and a measure of stress/anxiety in a sample of Sub Saharan countries (Gillanders, 2011). In addition, another study found that among European countries higher levels of corruption were related to higher odds of reporting worse health (Nicholson et al., 2009).

These brief results emphasize a certain level of disagreement regarding a potential negative relationship between societal corruption and well-being. Furthermore, they point toward a lack of studies that examined the effects of corruption on health and mental health. I will argue in the theoretical section of the paper that there are reasons to expect that living in a corrupt society can

have a negative impact on mental health. Subsequently, the first aim of my research is to get more insight in the relationship between societal corruption and mental health.

Previous research has also provided evidence supporting the idea that different social groups have different levels of acceptance of corrupt acts (Pop, 2012; Swamy et al., 2001; Torgler, 2006). In addition, evidence from both outside and from the European countries indicate that certain social groups are more likely to be victims of corruption, i.e., to have had to pay a bribe (Lee and Guven, 2013; Seligson, 2006). If different social groups have different experiences and acceptance of corrupt acts, the next question I ask is whether societal corruption has similar effects on their mental health.

Next, I am interested in a potential differential effect of corruption on the mental health of individuals living in different European regions. In this paper, I will distinguish between the western democracies and the eastern formerly communist countries. Previous studies argued that especially in the former communist countries corruption practices are more extensive and they have become embedded in the cultural milieu (Sandholtz and Taagepera, 2005). Furthermore, these countries fall in the category of new democracies and since the beginning of the 90s they have experienced social and economic turmoil paired with high levels of corruption. These brief considerations suggest cultural and institutional differences between the western established democracies and the former communist countries, and this raises the question whether the relationship between societal corruption and mental health could be different in the two regions.

From a methodological point of view, I note that previous literature used multi-country cross-sectional data and multilevel models as method of analysis. However, the results of these static cross-sectional analyses are not sufficient for making strong claims of a causal relationship because unmeasured country level variables could confound the relationship (Jæger, 2013; Schmidt-Catran, 2012). A way to move further is to use longitudinal data and fixed effects models that allow researchers to account for time invariant confounders. Such dynamic analyses would provide stronger evidence of a causal relationship.

Even though longitudinal data and dynamic type of analyses are desirable, genuine multi-country panel data covering the general population and recording measures of mental health are missing. A solution to overcome this limitation is to take advantage of the accumulation of similar measures collected in multiple time points and/or countries but on different samples and construct pseudopanels (Deaton, 1985). The increased availability of such data has resulted in the development of methods that allow researchers to examine the relationship between changes in contextual characteristics and changes in various outcomes (Jæger, 2013; Schmidt-Catran, 2012). In relation to the present research, the strong point of the pseudo-panel framework of analysis is the ability to control for all time invariant country level characteristics that could confound the effect of corruption on mental health.

In the present paper I take advantage of the accumulation of high quality cross-sectional data collected by the European Social Survey (ESS) (Jowell and Team, 2007) and employ both static and dynamic type of analyses, i.e., multilevel models and fixed effects models for pseudo-panel data. This dataset has the advantage of collecting comparative information on a widely accepted measure of mental health, i.e., depressive symptoms, in the waves 2006, 2012 and 2014. This said, from now on I will use the term depressive symptoms instead of the more general mental health term.

Given the above, in the present paper: 1) I look at the *levels* of and at the *changes* in societal corruption in relation to the individuals' depressive symptoms; 2) I inquire whether the strength of these relationships is different for different social groups and 3)

between western and eastern European countries. Furthermore, from a methodological point of view, I inquire whether the use of dynamic pseudo-panel analyses versus static cross-sectional multilevel models leads to different conclusions. My strategy is to conduct the analyses in two steps. First, I conduct static multilevel analyses using the data of each wave. Second, I construct a pseudo-panel dataset and employ fixed effects models that allow estimating the relationship between the changes in time in corruption and the changes in depressive symptoms.

1.1. Theoretical background

Previous studies have devoted relatively little attention to developing a detailed causal argumentation for the relationship between corruption and well-being. Gillanders (2011) argued that being a victim of corruption, i.e., having to pay bribe in different situations, could cause stress for those affected and via this mechanism it could impact mental health. Tavits (2008) argued that living in a country with high level of corruption will negatively affect the belief held by people that they can influence political decisions that allow them to gain political representation of their interests. Building on these arguments, I propose that corruption could impact the depressive symptoms of individuals through several mechanisms.

First, in line with Gillanders (2011) I argue that corruption could act like a type of contextual stressor. Corruption, by definition, implies that the rules of access to social and material resources do not work properly. For instance, when considering individuals with certain characteristics (e.g., education, qualifications, material deprivation) that compete for the same type of resources (e.g., job, housing, public services) one would expect that the most deserving individuals will be successful. However, in societies where "money can buy anything" there is no certainty that this is the case — jobs can be obtained by the ones who have more connections, cheap housing could be allocated to those who have the means to bribe the public officials and not to those who are entitled, etc. Consequently, corruption could be appraised as a threat or a situation in which some damage or loss could occur to the individuals (Lazarus and Folkman, 1984), and thus it could qualify for the status of a social stressor.

A recent study using ESS data collected in 2005 reported that on average only 6 percent of Europeans were asked to pay a bribe and only around 2.5 percent reported to have actually paid one (Lee and Guven, 2013). Although it could be argued that being a direct victim of corruption will have a stronger effect as a stressor, I argue that corruption could be threatening for everyone, regardless of a direct experience with it. On the one hand, mass-media reports of corrupt scandals as well as cases of corruption victimization that occur within one's network could increase the salience of the phenomenon. On the other hand, shared perceptions of high societal corruption could lead to the heightened expectations of individuals that they or their loved ones could become victims of corrupt practices. In turn, the constant expectation of something bad to happen could become a stressor and could increase the level of depressive symptoms.

Second, I draw from the writings of Mirowsky and Ross (1986) and Ross and Mirowsky (2006), and propose that corruption could decrease optimism and increase powerlessness. These mental states were all previously linked to heightened depressive symptoms (Makikangas et al., 2004). Faced with an unfair system that obstructs the legitimate access to social resources, individuals could feel powerless especially if they cannot find a way to cope with the situation, e.g., they do not have the financial or networking resources to compete. Individuals could lose confidence in their capacity to obtain desired social resources, as their abilities and

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