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Demographic transition, inter-generational contracts and old
age security: an emerging challenge for social policy in
developing countries
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#### **Summary**

The world's population is ageing rapidly as a result of demographic transition, and it is currently ageing most rapidly in the developing world. Ageing is consequently set to become a key development issue and a challenge for social policy. Yet a review of the literature suggests that research on ageing in the Southern context, particularly those countries undergoing demographic transition, is still in its infancy. This paper reviews some of this literature, organising the analysis around the concept of 'inter-generational contract', the set of norms, rules, conventions and practices which govern the relationship between different generations at the level of families and at the level of society. It offers evidence that there is a reconstitution in these contracts underway in many societies, reflecting and in turn contributing to, the changing beliefs, values and material realities which tend to accompany demographic transition. Although there is much greater diversity in the situation of the elderly than is often recognised by many of the studies reviewed, there is a perceptible shift within this literature from an earlier consensus which saw the elderly as well cared for and supported within the family to a growing view that they constitute a vulnerable group within families. We briefly explore the implications of our findings for a research agenda on this issue as well as for social policies to meet the needs and promote the rights of elderly cohorts.



### **Contents**

	Sun	nmary	iii
	List	of boxes and tables	٧
1.	Int	roduction	1
	1.1	Demographic transition and changing age structures	1
	1.2	Disaggregating the 'ageing' process: age, geography and gender	2
	1.3	The 'ageing' of the Third World: a new challenge for development policy	5
2.	Int	er-generational contracts in the context of demographic transition	v 1 1 2 5 7 7 on 8 sion:
	2.1	Conceptualising inter-generational contracts	7
	2.2	Inter-generational contracts and the situation of the elderly in pre-transition	
		societies	8
	2.3	The changing situation of the elderly in the context of demographic transition:	
		a question of family values?	12
	2.4	The changing situation of the elderly in the context of demographic transition:	
		a question of socio-economic structures?	16
	2.5	Inter-generational contracts in the context of transition: breakdowns,	
		continuities and renegotiations	20
	2.6	Conclusion	25
3.	Wh	at does all this tell us about social policy?	26
4.	Cor	nclusion	28
	App	pendix A	30
	Ref	erences	33
Boxe	S		
Box 1.1	1	Ageing populations: some facts	2
Box 1.2	2	Ageing in India and China: some facts	3
Table	s		
Table A	۱1	Demographic transition and the ageing of the population: the global picture	30
Table A	١2	Annual growth rates in the populations of older people 1995–2000	31
Table A	١3	The proportion and number of people over 60 in selected developing countries	31
Table A	۸4	Life expectancy at birth – estimates for 1990–1995 and assumptions to 2150	32



#### 1 Introduction

#### 1.1 Demographic transition and changing age structures

One of the outcomes of the demographic transition from high rates of fertility and mortality to a decline in mortality rates, followed by declining rates of fertility, is an increase in the elderly as a proportion of the total population. The mechanism is simple: fewer children are born and older people live longer. The advanced industrialised countries are in the final stages of this transition, with birth rates at, or below, replacement level. In the developing world, however, fertility rates have only recently started to decline. As a result, the elderly form a larger percentage of the population in the industrialised countries than they do elsewhere. However, it is the developing world that is currently reporting the most rapid rates of increase in the proportion of the elderly in its population. Ageing is fast becoming a development issue and a challenge for social policy.

It is important at this stage to clarify what we mean by 'ageing' and to distinguish between chronological and functional age. A great deal of the discussion and statistical data in this paper is in terms of chronological age and focuses on those aged 60 and over. While this allows for ease of cross-country comparison and analysis, we need also to understand 'age' in its historical, cultural and locally relevant terms (Khasiani 1994; Messkoub 1997). Ageing is not a process perceived or experienced in standard universal ways; there are important cultural, economic, social and demographic variations (Lloyd-Sherlock 2000). There are also significant variations in the ability to engage in productive and reproductive work, largely concealed by the use of a generic age category such as over 60 (less so in the developed world due to the wider application and relevance of a formal retirement age). The significance of a more refined analysis of ageing encompassing functional aspects of the process becomes apparent in the more qualitative issues raised by this paper.

Secondly, it is important to recognise that while ageing may be associated with natural and biological processes, these affect, and are in turn affected by, the social and economic status of the elderly. The ageing process may often be accompanied by chronic and degenerative conditions (Mugabe 1994), but the health profiles of individuals vary, as do the possibilities for delaying the onset of these conditions. Caution needs to be exercised in making generalisations about the capacity of older age groups. To seek to interpret ageing in purely biological terms which associate the elderly with certain biological characteristics carries the danger of depriving them of their agency, denying their capabilities and reinforcing their exclusion. Bearing these caveats in mind, some basic facts about current demographic trends and their implications for the age composition of populations in different parts of the world will help to set the stage for our later discussion about what this might imply in development terms.

#### 1.2 Disaggregating the 'ageing' process: age, geography and gender

#### **Box 1.1 Ageing populations: some facts**

#### Global trends:

- Projections for population growth in the first quarter of this century suggests that fastest rates of growth in the population will occur amongst older groups (Heslop 1999) see Tables A1 and A2 in Appendix A.
- The population below the age of four will barely change. However, those aged more than 60 will double while those aged more than 80 will nearly treble in the first quarter of this century (Heslop 1999).
- The share of the world's population aged 60+ is projected to rise from today's 10% (542 million) to 20% (1.9 billion) by 2050 (Heslop 1999).
- Globally, before 2050 the number of those above 60 will surpass those aged less than 15 for the first time in history (Randel, German and Ewing 1999).

#### Developing country trends:

- The rate of growth in the elderly population is most rapid in developing countries: they account for around 60% of the world's population over the age of 60; this will rise to 70% by 2025 (Heslop 1999).
- While the number of people aged over 60 increased by more than 12 million across the world in 1995, almost 80% of this increase took place in the developing world (HelpAge International 2001).
- 8% of the total population in the Third World is in the 60+ age group. It will be 13% by 2025 and 30% by 2150 (Heslop 1999).
- The number of older people in developing countries will more than double over the next quarter of a century, reaching 850 million by 2025 (Randel *et al* 1999).

As the statistics summarised in Box 1.1 show, the world's population is ageing rapidly as a result of demographic transition, and it is ageing most rapidly in the developing world. However, this global process has to be disaggregated into its constituent parts if a clearer picture is to be obtained. First of all, as Tables A1 and A3 in Appendix A show, the increase in the rate of 'ageing' is not evenly spread across the developing world since they are themselves at different stages of transition. Those regions which are in the early stages of demographic transition, with high levels of mortality and fertility, mainly in sub-Saharan Africa, are likely to be preoccupied with very different issues and resource questions compared to those where mortality and fertility rates have declined: East Asia, Latin America and more recently, South Asia and countries of southern Africa. These in turn will diverge considerably from countries on the 'far side' of demographic transition, the OECD countries and some of the transitional economies (Russia and China) where the ageing of the population raises questions about the sustainability of inter-generational transfers.

While Latin America is currently experiencing a clear and sustained process of ageing, there are marked differences between countries (Restrepo and Rozental 1994). Nicaragua for example had 3.0 per cent of its population aged 65 and over in 1998, and Colombia 4.5 per cent, while Uruguay had 12.5 per cent and

<sup>&</sup>lt;sup>1</sup> The UN defines a country as 'ageing' when the proportion of people over 60 reaches 7 per cent (Prakash 1999).

Argentina 9.5 per cent (World Bank 2000). Many parts of South Asia and sub-Saharan Africa continue to have relatively stagnant levels of life expectancy and high rates of fertility, leading to an as yet slow growth rate in the elderly population (Kochar 1999). As a result, the share of the working age population is still rising in much of the developing world. It will not decline for another 25–40 years in a number of African countries (Brown 1999; Messkoub 1997). However, the trajectory of demographic transition in Africa has been complicated by the high rates of mortality, particularly among the working age population, resulting from the HIV/ AIDS epidemic. This is likely to cause a sudden surge in 'premature' demographic ageing (Lloyd-Sherlock 2000). While this is as yet unrealised, the number of people over 60 in Africa is projected to more than double by 2020 and its share of people over 80 will increase from 3 to 6 per cent of the global population (Randel et al. 1999).

In other countries, like India and China, it is the absolute numbers of the elderly, rather than their present proportions, which has given rise to policy concern (see Box 1.2).

#### **Box 1.2 Ageing in India and China: some facts**

- In 1985, Asia had 48% of the global total of older people. It will have 58% by 2025 (Gorman 1995).
- Fertility decline in China and India started in the 1950s so that their populations began to age earlier than most other developing countries (Singh 1999).
- Life expectancy increased dramatically in China over the last 35 years of the twentieth century (Siebert 1994). China's population will continue to age at unprecedented levels over the next 70 years, with life expectancy reaching 78 for men and 83 for women by the year 2070 (Randel *et al.* 1999).
- By the year 2025, life expectancy for the Indian male is projected to increase to 69.3 from 60.3 in 1995. Female life expectancy in India will rise even more steeply from 60.6 to 72.4 (Randel *et al.* 1999).
- There are 70 million persons aged 60 or more in India. This is 7% of the population (Zachariah 2001). This is projected to rise to 165 million by 2025 or 12% of the population (Randel *et al.* 1999).
- There were 115 million people aged over 60 in China in 1996 (9% of the population). This is projected to rise to 290 million by 2025 or 20% of the population (Randel *et al.* 1999). The over 65 year old population will grow to more than 400 million by 2050, and the number of people over 85 could increase from under 3 million in 1990 to 80 million by 2050.
- The Population Foundation estimates that 50 years from now, only 19% of the population in India will be under 15 instead of the present 38%. 15% of the population will be over 65, compared to the present 5% (*Times of India*, July 3, 2000).
- In the time period 1998-2015, the average annual population growth rates for China will be as follows: -0.8% age 0-14; 1.0% age 15-64, and 2.3% age 65+ (World Bank 2000).
- More than a quarter of all people aged 75 or more live in China and India today (HelpAge International 2001).

There are also variations in the rate of ageing within countries. North Indian states for example are far behind states in South India in terms of their progress towards demographic transition. Kerala and Tamil Nadu, in particular, have almost completed their transition, with near-replacement level birth rates. There are also rural-urban differentials in patterns of ageing (Lloyd-Sherlock 2000; Stloukal 2001). In eastern, west and middle Africa, for example, the highest percentages of elderly population reside in rural areas (largely due to age selective migration) compared to urbanised elderly populations in North Africa (Brown 1999). South Asia is also marked by predominantly rural aged populations: in the 1991 census, four-fifths of India's elderly lived in rural areas (Rajan *et al.* 1999).

It is also important to recognise diversity among those characterised as old. The elderly population is itself ageing, making it necessary to differentiate within the older cohorts of populations by age. The 'old' old (80+) is the fastest growing group among the elderly cohort (see Table A2, Appendix A). In developing countries in 1996, almost one-fifth of the older population were aged 75 and over (HelpAge International 2001). By 2020 the majority of the 'oldest' old will live in developing countries (Restrepo and Rozental 1994). Making the distinction between the old-old and young-old is clearly important in terms of developing policy responses which make a distinction between supporting capabilities and providing care.

Gender differences are also relevant. In most parts of the world, women tend to live longer than men so that they also outnumber men in the older cohorts. This imbalance is likely to rise with the increase in life expectancy (Restrepo and Rozental 1994) — see Table A4 in Appendix A. Even in countries with life expectancy below 65, women who do reach this age can expect to live for a further 11 to 14 years (HelpAge International 2001). Given the size of Asia's population, it is not surprising that the number of older women in Asia exceeds the total of all older women in developed countries. It is projected to increase from 144 million to 355 million by 2025 (Randel et al. 1999). For the over 80s, women currently outnumber men by approximately two to one (Randel et al. 1999). However, it is also important to keep in mind the implications of the widely discussed 'sex ratio' question in the South Asian context (and beyond) for the gender composition of its elderly. Extreme forms of discrimination in this region has led to excess female mortality in most age groups, lower life expectancy for women than men and, as a result, more men than women in the total population. The adversity of the sex ratio in the overall population has also led to men outnumbering women among older age groups (Lloyd-Sherlock 2000). This used to be the case in India but has been reversed over the last 15 years, with 107 women per 100 men aged 65 and over in 1998. In contrast, Bangladesh had 81 women per 100 men aged 65 and above in 1998 (World Bank 2000).<sup>2</sup>

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Other countries with more men than women aged over 65 in 1998 included Chad, Cote d'Ivoire, Jordan, Kuwait, Libya, Mozambique, Nepal, Pakistan, Saudi Arabia, Tunisia, UAE, the Republic of Yemen and Zambia (World Bank 2000).

#### 1.3 The 'ageing' of the Third World: a new challenge for development policy

The projected ageing of the population in the developing world presents a more challenging prospect for social policy than it did for advanced industrialised countries because of the conditions under which it is currently occurring. In contrast to the experience of most advanced industrialised countries, where transition occurred gradually over the course of centuries, and in the context of industrialisation and rising levels of affluence, mortality declines in today's developing countries have been sparked by rapid advances in medical technology (e.g. mass vaccination) rather than by significant improvements in their socio-economic conditions. Technology has also served to accelerate the pace of fertility decline, creating "compressed" demographic transitions amidst conditions of persistent poverty and low levels of economic development (Gorman 1995; Kalache 1994; Siebert 1994; World Bank 1994). It took France 115 years to increase its proportion of older people from 7 to 14 per cent, 25 years in Japan, and will take 20 years or less in most developing countries (Randel *et al.* 1999). Countries such as Colombia, Costa Rica, Liberia and Venezuela are expected to experience an increase of more than 200 per cent in their older populations in the next 25 years (HelpAge International 2001).

The advanced industrialised countries have sought to cope with the challenge of ensuring security in old age through the increased 'socialisation' of old-age security, replacing care within the family with care provided through market or state provision. Such formalised provision is still largely absent or extremely uneven in the poorer countries of the world. The effects of the growing population of older people on family-based arrangements, which remains their main source of institutional support,<sup>3</sup> is not yet clear. It is also worth bearing in mind the fact that the problem of provisioning adequately for the elderly has still not been satisfactorily resolved in the wealthier countries, despite the length of time over which demographic transition occurred (Kalache 1994). This places the scale of the problem the Third World is facing in some context.

There is evidence that the issue of ageing is finding its way onto the international agenda. The UN hosted the first World Assembly on Ageing in Vienna in 1982 and adopted the International Plan of Action on Ageing. In 1999, the International Year of Older Persons, the UN Principles for Older Persons were drafted (Beales 2000). However, this interest has only unevenly been translated into national or donor policy. Policy concerns bearing on demographic transition have tended to focus primarily on bringing down rates of fertility. The consequences of fertility decline for the age composition of the population have been largely ignored, even though ironically, ageing often features in these discourses because of the links made between children as a form of insurance in old age (Messkoub 1997).

Rates of institutionalisation in the developing world are extremely low. In 1987, the UN estimated that merely 0.5 to 2 per cent of over 65 year olds were in old-age homes (UN Secretariat 1994).

<sup>&</sup>lt;sup>4</sup> International interest could also be described as cursory. While ageing is on the agenda, the situation of older persons is rarely incorporated into key social development agreements e.g. the International Development Targets fail to reflect elderly poverty (Beales 2000).

This link between the 'greying' of the population and declines in fertility is dramatically evident in China, where the strict enforcement of the one child family has led to a steep decline in the dependency ratio at the younger end of the life cycle, but increased it rapidly at the older end. The issue of old age security is very much a policy concern in the present Chinese context. Elsewhere, where policy attention to the elderly is still lagging, evidence suggests that older people are consistently among the poorest segment of society, vulnerable to isolation, ill health and insecurity (Hugo 1997; Randel *et al.* 1999). That we know very little about the processes that produce this disadvantage can be attributed to a number of factors:

- The elderly in most developing countries as yet represent the smallest demographic group, and are thus
  marginalised from the mainstream of development thinking at both national and international levels
  (Mugabe 1994; Sen 1994).
- Developmental progress has tended to be equated with production and where analysis has looked at the family within the development process, it has tended to concentrate on its 'productive' members, either its currently productive members (working age adults) or its future producers (children) (Clark and Laurie 2000; Derricourt and Miller 1992; Gorman 1995). Consequently, commitment of resources to the elderly (assumed to be unproductive) is perceived as a drain on constrained budgets and a brake on progress.
- There is a widespread belief that family-based arrangements for caring for the elderly, the traditional form of security in old age, are still sufficiently resilient to make public concern redundant (Kochar 1999).

This paper sets out to remedy some of this gap in our knowledge. It explores the implications of on-going demographic transitions in different parts of the developing world for the care and support of the elderly in order to ascertain what forms of provisions are in place, and the extent to which these provisions are adequate to meeting their needs for survival, well-being and dignity. The analysis in the paper is organised very broadly around the concept of 'inter-generational contract', the set of norms, rules, conventions and practices which govern the relationship between different generations at the level of families and at the level of society. The first part of the paper elaborates on this concept and its relevance in the context of demographic transition. It then goes on to explore some of the empirical evidence on the effects of demographic transition, and the accompanying socio-economic changes, in different parts of the developing world, as well as responses to them on the part of the elderly. The third section briefly explores the policy implications of ageing populations in terms of meeting the needs and promoting the rights of elderly cohorts.

#### 2 Inter-generational contracts in the context of demographic transition

#### 2.1 Conceptualising inter-generational contracts

Family relationships can be conceptualised as a series of cross-cutting 'implicit' contracts, viz. shared understandings about the roles and responsibilities, claims and obligations, which different categories of family members have towards each other (see discussion in Kabeer 2000). Such contracts are implicit in that they are shaped by the wider norms and values of a society rather than arrived at through individual negotiations, although clearly different family members will interpret the terms of these contracts with some degree of individual discretion.

Inter-generational contracts refer to the mutual claims and obligations which govern relationships between different generations within the family, conventionally conceptualised in terms of three generations:

young children > adult parents > ageing (grand) parents.

Such contracts tend to be organised around two different kinds of dependency experienced by the same individual but inter-temporally separated: the dependency associated with infancy and early childhood and the dependency associated with infirmity and old age. The essence of the inter-generational contract is that parents look after their children when they are young and expect to be looked after by them in their old age: 'looking after' in this context extends to emotional as well as material support.

Clearly, the experience of the dependency associated with childhood will depend on the extent to which parents honour their obligations to their children. This will in turn help to shape how those children honour their obligations to their parents in the latter's old age. Inter-generational contracts may be socially constructed but, as we have already noted, their interpretation allows some scope for individual experience and individual discretion. However, there is an inter-temporal asymmetry in the nature of the contract which means that the greater the scope for individual discretion, the greater the risk for the elderly. Parents carry out their obligations in anticipation of future returns; children in recognition of past benefits. The contract therefore requires an act of faith on the part of parents who sacrifice current consumption for future security on the assumption that their children will survive, will become economically productive and, most important, will be willing to honour their side of the contract when parents have become old and dependent. A quote from Adam Smith (cited in Collard 1999) captures the nature of the problem:

A person's affections are by nature more strongly directed towards his children than towards his parents, and his tenderness for the former seems generally a more active principle than his reverence and gratitude towards the latter . . . everything may be expected, or at least hoped for, from the child. In ordinary cases very little may be either expected or hoped for from the old man.

(Adam Smith, Theory of Moral Sentiment)

Things are consequently not left entirely to the 'reverence and gratitude' of individual children and historically, many societies have sought to ensure that power lies with the elderly in material, symbolic and emotional terms. As Miller points out, the biblical commandment to 'honour thy father and thy mother' is a central tenet of the Judeao-Christian tradition, but there is no reciprocal command to parents to honour their children. Similarly, other cultures have also sought to ensure that respect, power and status tend to increase with age, as does control over critical resources (Cain 1991a; Rwezaura 1989). As long as this is the case, children are likely to take the terms of the contract as given, rather than seeking to contest, or renege on, them.

### 2.2 Inter-generational contracts and the situation of the elderly in pre-transition societies

Family-based inter-generational contracts tend to be strongest in contexts where families are the dominant welfare institutions, and where the possibilities for adult children to secure their livelihoods, and ageing parents their survival and security, independent of family support and community networks, are largely absent. It is noteworthy that the literature on the early phases of demographic transition in the northwest European context suggests that from a very early phase of its history, the security and welfare of elderly parents had very little connection with numbers of surviving children. As Stone (1977) suggests, aid and direction were welcomed from wider kin and community rather than necessarily from family members. Other accounts point out that an explicit retirement contract was a common way among those with property of assuring their needs in old age till death. As Cain (1991a) notes, this practice suggests that unenforced filial obligation was rare. In fact, these contracts themselves did not have to be with children, or even kin, although children might have been preferred. For those without the property to secure such inter-generational contracts, the prospect of old age was grim and in England, a pattern of life cycle poverty produced regular disparity in the economic status of an elderly parent and their progeny. Their fate rested on publicly provided relief for the poor. It is unlikely that concerns about economic security in old age were a factor in reproductive decisions under these circumstances. Indeed, Cain suggests that what stands out in a comparison of contemporary South Asia, for instance, with northwest Europe in the past is the irrelevance of kin to the welfare of the elderly in the latter and the irrelevance of community to the welfare of the elderly in the former.

By contrast, studies of pre-capitalist, as well as contemporary agrarian, societies in Asia and Africa testify to the significance of family networks to security in old age. Indeed, in the absence of alternative institutional arrangements, family members, and children in particular have been the primary form of insurance for old age. These were not individualised contracts of the kind described for England by Cain, but aspects of the way

that their societies were organised. While there are, and always have been, a diversity of householding arrangements across the world, ties of family and kinship are constructed to bind their members together. However, these ties were generally organised around hierarchical principles, with the elderly being given privileged status. The respect and status accorded to the elderly gained its strength and legitimacy from indigenous law, religious teachings and from cultural belief systems. Confucianism in East Asia (Ikels 1990; Kwon 1999; Martin 1990) and the Judaeo-Christian religions which dominate in other parts of the world (Brown 1999) all uphold the privilege of the elderly. In such societies, children who failed to care for their elderly parents faced social disapproval and ostracism and, in some cultures, also formal sanctions in the form of fines or incarceration (Brown 1999).

Inter-generational claims and obligations were therefore woven into the social fabric of such societies and ensured the full integration of the elderly within the family as well extending considerable status and respect to them (Tout 1989). Apt (1992), for instance, has noted that the role of the elderly in providing guidance within African societies is so widely acknowledged that the term used to describe old age is literally synonymous with wisdom. Similarly, Rwezaura (1989) depicts the significance of age as a criterion for the attainment of authority, power, privilege, prestige and leadership in Africa, helping to ensure that the economic and social security of the elderly was embedded in the social relationships of kin and community, as an imposed social discipline. Guillette (1994) describes the traditional role of the elderly among the Tswana, the dominant ethnic group in Botswana, as 'gatekeepers for the family and social welfare', in the sense that the rural elderly were the teachers of tribal customary law which directed everyday behaviour, and also controlled family assets which served to heighten the position of the elderly as the mainstays of family corporacy.

In Asian societies too, family and kinship hierarchies were organised along gerontocratic lines. The elderly were respected and revered for their advice and wisdom, cared for, and indeed central to family cohesion (Siebert 1994; Singh 1999). 'In the traditional, pre-transitional situation the emotional and often residential extension of the family entrenched and supported the strong position of the elderly' (Hugo 1997: 112). In purely practical terms, as well, the predominance of family based production and high fertility in these societies (ensuring the survival of at least some children to adulthood) ensured the availability of family care for parents as they grew older. High rates of mortality combined with the need for old age insurance tended to reinforce high levels of fertility.

However, while many accounts of the organisation of family life in pre-capitalist societies, as well as in contemporary developing societies, have focused primarily on the importance of value systems in underpinning the status of the elderly members of the family, others have stressed the additional importance of economic factors in shaping the structural position of the elderly and differentiating between them. As Caldwell (1982) has pointed out, most pre-transition societies are characterised by a net inter-generational lifetime flow of wealth within the family which very much favoured the older generation. Differences in principles of inheritance and access play an important role in ensuring this outcome. For instance, societies

vary in the extent to which land is held individually or in common and in the importance of use versus ownership rights. In the African context, for instance,

Kinship ties provided an institutional framework through which the elderly made legitimate claims upon labour power, property and the services of junior relatives, and also through which the latter made reciprocal demands on the elders. In other words, kinship ties in traditional Africa constituted an important criterion for the assignment of rights and obligations over property and other resources.

(Rwezaura 1989)

In East Africa, clans were created through the combination of several extended family units. Such clans ensured elderly men and women had access to land and other vital sources of sustenance. In addition, matriarchs wielded the power in the home while patriarchs headed affairs at the level of the community (Khasiani 1994).

The power and high status vested in the elderly on account of the wisdom they represent was therefore inseparable from the power the elderly could lever on account of their control over resources. Pre-transition, these were self-reinforcing elements that cemented the elderly's position at the head of and in control of familial affairs. The status and authority associated with old age, backed by the control over material resources invested in seniors, meant that, while old age may have been accompanied by declining physical capacity, it did not lead to insecurity: while older members within the family may have depended on the young for support, the form of dependence 'was more akin to the superior's dependence on the toil of the subordinate than the frail and helpless depending on the strong and healthy' (UN 1994: 16).

Societies also vary in the extent to which women are treated as important economic actors along with men and provided with independent access to material resources. Patriarchy, as the term is traditionally understood by anthropologists, refers to 'the rule of the father' as a way of organising family and social life which placed senior males in positions of power over the rest of the family. Many traditional, agrarian societies were, and continue to, invest responsibility for the survival of family and kinship in the elder male, backing it with authority as well as control over material resources. The 'monopolistic gift' of land (Caldwell 1982) to these older males gave them control over the labour of family members, a crucial resource in contexts where families were the primary units of economic organisation (Hugo 1997). Even in societies where productive resources were held in common, it is often elderly males, rather than the elderly per se, who exercise allocative power. Bridewealth in 'traditional' Africa is another example of patriarchal control over resources. For the patriarch, bridewealth represented an important source of income and also control over daughters. Rwezaura therefore describes this control over nubile women as an important source of old age security (Rwezaura 1989). Caldwell's work in rural Bangladesh found the power to make decisions surrounding the consumption, sale or exchange of family-produced goods, subsequent allocations, and

concepts of control and ownership, rested securely in the hands of elderly patriarchs. He regarded the product as his and saw all related decisions such as the pooling or distribution of income as his:

The patriarch's sole right to control the land and his ownership of its product is undisputed. Other members of the family take it that they receive, in return for their labour, food, housing and security. If they were to demand more, the patriarch's control of resources, together with local support for his attitude, would certainly be great enough to render the challenge harmless.

(Caldwell 1982: 366)

Demographic and anthropological literature has helped to sketch out a 'geography of gender', regional patterns in kinship organisation with important implications for the security of the elderly (Caldwell 1982; Dyson and Moore 1983; Kabeer 1996; Kandiyoti 1997). It points to regions of 'strong patriarchy' including northern Africa, the Middle East, the northern plains of the Indian sub-continent and the societies of East Asia. Here kinship is predominantly patrilineal and post-marital residence is patrilocal. Households are organised along highly corporate lines based on strong conjugal bonds and cultural rules that focus on male responsibility for the protection and provisioning of women and children. The elderly male was at the apex of this structure of authority. In the 'weaker' patriarchies which prevail in southern regions of the Indian subcontinent as well as in south-east Asia, households are also organised along corporate lines, centred on the conjugal relationship, but these family structures are marked by greater flexibility in post-marital residence practices, greater incidence of brideprice and a greater degree of public mobility allowed to women. Kinship patterns are often bilateral with women having some rights of inheritance and continuing interaction with their natal families after marriage (Kabeer 1996). This has particular consequences for widows and indeed the availability of support for elderly parents. Son preference is most marked in the belt of strong patriarchy, reflected in the masculine sex ratios of many of these countries and the associated excess female mortality among children (Kabeer 1996).

It is therefore important to note in generic examinations of the changing situation of the elderly such as this, that the degree to which younger generations were governed more by resources than by the intrinsic authority of old age (or vice versa) was to a certain extent conditioned by historical familial patterns. To varying extents, such patterns structure and influence the course of effects of transition on the lived experiences of the aged in the developing world. In addition, a materialist account of the status of the older generation within a society also draws attention to the fact that veneration of the aged was, and is not, uniformly high. We noted earlier Cain's account of the situation of the assetless elderly in pre-transition Britain. Martin has made a similar point in relation to the societies of South and East Asia where status was always strongly correlated with the control over economic assets (Martin 1990). The elderly poor were particularly disadvantaged in terms of social and economic support and status in many contexts because they lacked control over their children that comes with property ownership, such as that over land (Cain 1991a;

Panda 1998). The mere existence of extended family arrangements is, therefore, not necessarily indicative of the well being of older persons. As well as the resource position of the overall family, the well being of the elderly may be directly linked to their individual ownership of assets and access to resources (Gorman 1995). The situation of elderly women perhaps more than men, was precarious among the poor. As Chen and Dreze (1992) point out, patriarchal systems not only denied elderly women control over resources (through patrilocal residence and patrilineal inheritance) but were also inherently interwoven with hierarchical social structures that considered the lifestyle of women (their roles and responsibilities) as an important indicator of the status of different groups.

# 2.3 The changing situation of the elderly in the context of demographic transition: a question of family values?

How is the situation of the elderly changing in the context of the demographic transitions which are underway in many parts of the world? There are a number of different ways in which this question has been approached but they fall very loosely into two broad categories:

- those that emphasise changing beliefs and values which impinge on the role of the family, intra-family
  relationships, fertility behaviour and the attitudes of the young towards the old,
- and those that explore this question in the context of the socio-economic transformations which have led to
  changes in the institutional organisation of family life within the wider society, resulting in both fertility
  decline as well as changes in relationships within the family.

We will deal in this section with accounts which fall in the former category and then go on in the next section to consider the latter. The work of Caldwell is one of the better-known examples of the former. According to Caldwell, the extended family structures associated with earlier family-based production systems were characterised by weak emotional links between spouses and a denial of the primacy of emotional links between young children and their biological parents (Caldwell 1982). Instead, emotions and loyalties were diffused over a wider network of kin, the vertically extended family in the corporate family structures of South Asia and the Middle East and across the lineage-based clans in the African context.

Caldwell conceptualised demographic transition in terms of the changing structure and functioning of the family and more specifically the shift in the direction of net inter-generational wealth flows<sup>5</sup>: from the young to the old (viz. children to parents) in pre-transition societies and from the old to the young (parents to children) in societies undergoing transition. As a result, high fertility (or indeed any fertility) becomes a net lifetime burden. Caldwell's explanation of the reasons for the shift focuses on changing values and beliefs. As

<sup>&</sup>lt;sup>5</sup> Caldwell's wealth flows are defined as all the money, goods, services and guarantees that one person provides to another (Caldwell 1982).

Thadani (1978) pointed out, it is strongly influenced by 'modernisation' theory, suggesting that the shift occurred with the 'westernisation' of beliefs and attitudes towards the family, including attitudes towards children, as a result of the spread of mass education. The 'emotional nucleation' of the family, which occurred as a result of these changing ideas, was associated with gradual concentration of parental emotions and resources on children rather than on extended kinship networks, as had been the case previously:

Very subtle shifts in emotional relationships within the family, usually reflecting changes in society's attitudes towards male-female and parent-child relationships, can dramatically alter the direction of the wealth flow. A strengthening of spousal relationships can both weaken extended family relationships and can alter inter-generational relationships.

(Caldwell 1982: 338)

As family-based production systems declined, often in the context of urbanisation, and education became the basis of economic mobility, the younger patriarch displaced the ageing and dependent father as family breadwinner and decision-maker, concentrating his effort to the improvements in the situation of his immediate family. This nucleation of families in turn induced reductions in the traditional support available to the elderly beyond just the physical implications of fewer caregivers.

Other studies on 'ageing' which draw on the modernisation paradigm, perhaps less explicitly, to explain demographic transition have also highlighted the role of changing values and their largely negative implications for the elderly. The transformation of traditional societies to modern, urbanised societies in the post colonial era is believed to have induced a reversal in the fortunes of the elderly in ways that undermined the very basis of their citizenship and social status. According to Cowgill (cited in Sen 1994),

Modernisation often sets in motion a chain reaction which tends to undermine the status of the aged. The major facts contributing to this decline in status are the decreased importance of land as a resource of status, the decreased importance of the extended family, increased geographical mobility and rapidly changing technology, social structure and cultural values.

(Cowgill 1986)

In some studies, it is maintained that inter-generational solidarity is being replaced by an inter-generational divide, with the elderly being outflanked by modern values of individualism associated with the spread of education and changing economic structures (Brown 1999; Derricourt and Miller 1992). According to many analysts, changes in social values and expectations about family relations and duties is the result of the disruptions to dialogue, the frequency and patterns of interaction, and continuity of relations between generations. Martin for example cites the decline in arranged marriages in post-war East Asia, arguably a consequence of modern education, as an indicator of the loosening of inter-generational ties, and

consequently an example of a loss of role for the elderly (Martin 1990). Similar conclusions are drawn by Apt in relation to the banning of the main symbolic sources of gerontocracy in some African countries: initiations, customary rites and fastidious funerals (Apt 1992).

Education is seen to have replaced age as the barometer of wisdom and marker of status. Increased access to modernised formal education has led to the inculcation of new values and the projection of new models of social relations in many parts of the world (Brown 1999). This has brought the traditional roles and authority of the elderly into conflict with the values of successive generations. The role of the elder as source of wisdom and guidance is of less significance to younger generations who face a very different future (Brown 1999). The elderly are increasingly perceived as an obstacle to development and progress and youth is increasingly becoming what Siebert describes as the 'courted quality' (Siebert 1994). It is argued that a negative imagery associating old age with passivity, inflexibility and hostility to change has been cultivated through such processes (Gorman 1995): age is no longer seen to command authority but is rather associated with dependency in a time of decline and loss (Apt 1992). It is perhaps ironic, however, that a great deal of the analysis that depict the aged as being overrun by such processes, often has the effect of reinforcing the very same imagery.

Migration is seen as another factor which has contributed to the break-up of older patterns of family solidarity and the values on which they were based. Motivations for, and expectations of, migration are varied, but many of these studies emphasise the impatience of the young with the older traditions on their return, or on visits, to their rural homelands, as an influence of increased affluence and 'city living'. In addition, despite the existence of remittances, the personal interaction between generations is reduced and therefore the role of the elderly can be seen to be undermined (Apt 1992). 'Migration and urbanisation have both separately and jointly undermined the traditional social structure and have in turn contributed to the destabilisation of the values which in traditional times sustained and involved the elderly in a closely knit age-integrated society' (Apt 1992: 133).

The independence derived from new opportunities in the cash economy, given that the obligations of the wage earner are less circumscribed by familial morality (Caldwell 1982), allows more scope for the challenge of traditional structures of authority. Similarly, the decline of traditional technology, once an important element in the transfer of knowledge between generations and hence in the continuity of community, has weakened the authority of the elderly (Brown 1999). The elderly are perceived as marginal to modern economic rationality and dependent on its real beneficiaries (Lloyd-Sherlock 2000). If the moral economy becomes based upon use-value (Restrepo and Rozental 1994), the perception of elderly dependence and vulnerability has consequences for inter-generational solidarity (as well as equity).

The emergence of the 'modern' nuclear family form is seen as evidence of these adverse processes, and symptomatic of the breakdown of social cohesion. There are growing numbers of elderly people living alone or with a married spouse only (Kim 1996: Korea; Martin 1990; Panda 1998: India; UN 1994). Age selective

migration has of course ensured such residential segregation between generations in some countries, with urban populations consisting of proportionately fewer children and elderly people, and more working-age adults than rural populations (Marcoux 1994). However, newly married couples may also feel less obliged to co-reside with elderly parents (Martin 1990: China; Shah 1999: India; UN 1994). Inter-generational relations become qualitatively different in such scenarios, with the isolation of living alone or with spouse only (even if relations are still cordial, remittances sent, visits made, and income levels reasonable) (Shah 1999).

It is therefore argued that as the family ceases to be the dominant unit of production, the elderly lose control over the means of production and also endure the isolation and lack of care associated with population mobility, lower fertility and a better educated younger generation (Hugo 1997) or what Caldwell calls the growth in internal family egalitarianism, necessitating a less pyramidal and dictatorial structure (Caldwell 1982).

Familial production is characterised by inter-generational exploitative economic relations which favour the older generation, and by a morality that both justifies and facilitates this. Ultimately in non-familial production this morality will be replaced by another one of a more 'individualistic' type. However, moralities wither only slowly, partly because some parties have economic and other interests in their retention.

(Caldwell 1982: 350)

Patriarchal control over common budgets could for example be simply supplemented by outside earnings with young migrants unable to loosen ties with their rural natal homes due to the insecurity of employment in urban areas. So 'moralities wither slowly but wither they will' (Caldwell 1982).

For these writers, therefore, changes in value systems associated with modernisation and demographic transition have led to a secular decline in the security offered by family-based inter-generational contracts as far as the elderly are concerned. However, this focus on value change is largely elaborated in terms of societal forces and hence conducted at a high level of abstraction. It does not fully capture, or help to explain, the ground-level realities of demographic transition for the elderly. While evidence on this is still rather sparse, it nevertheless suggests that the on-going processes of change are multidimensional, that impacts are somewhat differentiated by context and that, within given contexts, further differentiated by socio-economic and other characteristics. Because these changes have not been systematically documented, all we can do in the context of this paper is to refer to those which appear most important.

## 2.4 The changing situation of the elderly in the context of demographic transition: a question of socio-economic structures?

Analysis of the ground level realities of the elderly in the context of on-going demographic transitions vary in their accounts. Some support the view that the situation of the elderly does indeed give rise to a cause for concern; others suggest far more complex and contradictory processes at work. However, where these studies differ from those discussed in the previous section, is in their focus on the socio-economic transformations which accompany demographic transition and indeed partly help to explain it. They stress therefore that demographic transition is not simply a transition from high to low fertility rates, from youthful to ageing populations, but part of a larger process that affects family structures and social relationships. The implications of demographic transition have therefore to be understood in the context of on-going socio-economic transformations. A number of important points emerge out of these studies.

The *first* important point to be drawn from these studies is that conclusions about the situation of the elderly cannot be read off from evidence on their residential arrangements. Some studies point to change, noting that growing numbers of elderly live alone or in smaller household units (UN 1994). Other studies emphasise continuity. According to Kochar, for instance, 80 per cent of individuals aged 55+ in India and rural Pakistan live in inter-generational households (Kochar 1999). Analysis for Thailand suggests relatively moderate impact of fertility decline with respect to co-residence despite the radical shift of most (56.2 per cent) couples having at least five children today to them having only two or three in the near future (75 per cent +) (Knodel *et al.* 1992).

However, neither set of findings tell us very much about the situation of the elderly. Just as residence within an extended family household does not necessarily tell us very much about actual support provided to elderly members, the absence of co-residence is an equally flawed indicator of either their well-being or of the state of inter-generational solidarity (Lloyd-Sherlock 2000). Where the elderly live on their own, the geographical proximity of family members also needs to be factored in. While not strictly constituting an extended family, children may reside in close proximity to elderly parents, thereby improving the availability of inter-generational assistance (Knodel and Debavalya 1997; Martin 1990; UN Secretariat 1994) and countering any 'emotional nucleation' (Amin 1996). Social support from non co-resident kin and remittances can also have a considerable impact on the lives of elderly parents left in rural areas (Chan 1999). Similarly the quality and reliability of care and support of co-resident children was never necessarily and is not uniformly high or

See also Bongaarts and Amin (1997: Bangladesh); Cain (1991b: South Asia); Cattell (1990 cited in Sen 1994: Kenya); Knodel and Debavalya (1997: South East Asia); Moller (1994: South Africa under apartheid); Sen (1994); Shah (1999: India); UN (1994: Latin America).

Knodel *et al.* (1992) go further by saying that whilst there will be reductions in the chances of elderly parents receiving material assistance from non-coresident children, this aspect of familial support will have little effect in the context of sustained co-residence, the most crucial aspect of the familial support system. Only one child need remain with parents, and migratory decisions among siblings will reflect the need for care and support of the elderly parents (Knodel and Saengtienchai 1996).

sufficient. Co-residence may increase the *opportunities* for inter-generational exchanges in terms of care, but this is not always translated into sufficient levels of care (Moller 1994). As Knodel and Debavalya (1997) also point out, unchanging living arrangements can mask the changing content of the relationships among household members. In scenarios of emotional and material neglect for example, living alone might be a preferred living arrangement for the elderly and should not therefore be portrayed as necessarily negative (Varley and Blasco 2000a).8

The second important point to make, and one which follows from the first, is that the analysis of 'ageing' has to be grounded in the particular contexts of social change in which demographic transition is taking place in order to understand how the changes in question might impact upon the situation of the elderly. By and large, as populations age (and age for longer periods), the need to provide care and support will fall on the increasingly diminishing numbers of those within younger age cohorts,9 and particularly adult sons. In many situations, this is likely to strain family support structures (Randel et al. 1999), particularly when it is accompanied by the increasing labour force participation of women, the traditional carers in the home. With increasing participation in the labour force, evident in most developing country contexts, women have less time for traditional caring activities (Concepcion 1994). Younger women's roles as carers of the elderly (or even acceptance of living with elderly in-laws) can no longer therefore be taken for granted (Varley and Blasco 2000a). Younger women may indeed rely more on the elderly's care-giving contribution for their own children. In addition, with more members of successive generations alive at any given point of time, intergenerational boundaries can become blurred. Similarly, increased life expectancy will cause family members to spend more time occupying inter-generational family roles than ever before. These factors of demographic transition have implications for the role, support and self-perceptions of the elderly (Bengtson 1994). The availability of same-generation support then also becomes a factor (spouses, siblings, cousins and so on), as does the relationship between non-adjacent generations and across family/ household boundaries.

Where extended families persist, the structure and size is often dictated by tradition. In patrilineal societies (e.g. East Asia and the northern tier of South Asia), the marital home was the husband's home. In matrilineal/ bilateral societies (e.g. South East Asia and the southern tier of South Asia), the location varies but virilocal residence is still often the case (Goody 1990; Debavalya 1997). Parents may therefore be alone if they have only daughters. Alternatively, with reduced fertility, the elderly may become more flexible with regard to the gender preference of children for the purposes of co-residence (Knodel and Debavalya 1997;

In the Philippines, there was less support for co-residence amongst the elderly than would be implied from actual living arrangements (Knodel and Debavalaya 1997). Ikels (1990) also finds evidence of substantial numbers of elderly preferring to live apart from their children in urban China but unable to do so due to housing shortages (as opposed to traditional values of co-residence holding them back).

Studies have shown that higher levels of assistance are strongly correlated with large numbers of children. See for example Hoddinott (1992) – having a greater number of children makes it easier to maintain both monetary transfers and assistance with tasks as households age. Parents influence migration decisions accordingly.

Shah 1999). In polygamous societies, elderly men are able to marry young women who take care of them in later life (Khasiani 1994).

There is therefore no one-to-one relationship between processes of demographic transition and socio-economic change. We can expect to find many different kinds of families and many different familial contracts associated with apparently similar stages of demographic transition. As noted earlier, pre-existing forms of social organisation (strong and weak patriarchies for example) are relevant in setting the parameters within which change occurs and hence the form that changes are likely to take (Kabeer 1996). Cultural superstructures can be resilient even in the context of the material bases of families changing (Caldwell 1982). The strength of patrilineal traditions, parent-son co-residence, religious doctrines and cultural traditions of support for elderly parents varies considerably across different contexts (Lee *et al.* 1994),<sup>10</sup> as does the extent of veneration shown towards the elderly as social repositories of wisdom, custom and property rights (Derricourt and Miller 1992). The implications of fertility decline for familial support systems for the elderly are likely to be greatest in settings where a joint family household is a critical feature of the elderly's well being, where there is strong son preference or where powerful norms regarding the gender of co-resident children exist (Knodel *et al.* 1992).

A third important point which the analysis of ageing in the context of socio-economic change helps to highlight is the relevance of structural factors. The social inequalities which permeate societies in a number of different contexts, and which are experienced by different sections of the population throughout their life cycle in Southern countries, are also likely to be relevant in differentiating the experiences of different subgroups of elderly people. Poverty undermines inter-generational solidarity (Sen 1994). As in the pre-transition era, the elderly are particularly susceptible to generalised and individual increases in poverty. They will also be at a disadvantage if poverty prevented access to education, employment opportunities and health care in earlier life, leaving them to face old age with diminished health status and without any form of savings or insurance. The individual vulnerability of the elderly person is likely to be reinforced socially in countries where there are either no pensions or where pensions are undergoing reform (Clark and Laurie 2000; Heslop 1999).

Intra-household inequalities may also have a bearing on how the elderly fare in old age. Position within the household is not just a matter of economic position; it also reflects social and cultural factors. Where implicit family contracts construct the support of the elderly as their 'due' rather than a form of dependence, they are unlikely to face any particular discrimination in the allocation of household resources, even in contexts of poverty. However these norms may begin to change in some of the ways documented in the previous section. Negative social and personal attitudes which construe ageing as a state of diminished

Japan for example reached demographic transition and achieved a socio-economic development similar to the West and yet the family structure and elderly living arrangements remain similar to neighbouring developing countries in Asia due to the predominantly prevailing ideas of filial piety (Kim 1996).

capacities, for example, are likely to exacerbate the elderly's isolation from decision making within the household (Beales 2000) and place them at a disadvantage when social goods are distributed within the household. In such situations, the economic resources commanded by elderly members are likely to become a factor. The elderly poor who do not own assets will enjoy qualitatively different relationships within the family to those enjoyed by the asset-owning elderly.

Life cycle perspectives on ageing have also proved particularly informative in uncovering the interaction between gender and generation. Elderly women are more vulnerable to economic and social deprivation than elderly men, in part due to the cumulative effect of their comparatively limited access to education and employment throughout their life cycle (Clark and Laurie 2000; Derricourt and Miller 1992; Gorman 1995; Messkoub 1997; Restrepo and Rozental 1994). Women can also suffer from a lifetime of inadequate nutrition, repeated childbirth, little access to primary health care and time consuming domestic work (Heslop 1999). In societies where childbearing capacity and married status is valued far more than old age, older women may be particularly vulnerable (Stloukal 2001). Finally, women without a mature son upon which to depend (or indeed childless women), face increased vulnerability to economic crises and to social stigma (Cain 1986). Elderly, childless widows represent a 'terminal generation', whereby the possibility of intra-family transfers of any kind do not exist (Collard 2000), leading to their 'chronic vulnerability' (Heslop 1999). These factors are compounded by the particular deprivations associated with old age discussed above.

Older women generally lack the savings, capital and control over assets which could provide the incentives for continued family support at a time when their health and income generating potential is declining (Khasiani 1994). Older women experience differential access to household resources in patriarchal cultures, not only when compared to younger women, but also older men (Singh 1999). In urban areas of China, 41 per cent of older women but only 4 per cent of older men live below an extreme poverty line (Wu 1991 cited in Randel et al. 1999). In India, households headed by widows are by far the poorest group with an average expenditure per person 70 per cent below the national average (Dreze 1990 cited in Randel et al. 1999). Women also tend to outlive spouses because of their earlier age of marriage and higher life expectancy, and are less likely than men to remarry. Studies in Zimbabwe (Hampson 1990), Mexico (Varley and Blasco 2000a) and India (Panda 1998) have found more older women living alone than older men. In many countries of Asia and Africa, more than half of all women aged 60 and over are widowed (68 per cent in Bangladesh), compared to 10–20 per cent of men (HelpAge International 2001). Widows face particularly acute discrimination (Randel et al. 1999). Widowhood is regarded as a 'social death' in India, with restrictions

A couple of recent studies have also pointed to psychological difficulties faced by elderly men. In particular, the loss of the 'provider' role so important to him in his adult life, the inability to perform household tasks and the looser affective relations with other family members (due to continued absence from the household in adult life), making adjustment to home life in old age especially severe (Varley and Blasco 2000b: Mexico). Knodel (1999) argues that all these factors can work in favour of elderly women, but only in weaker patriarchal contexts.

on dress, diet, public behaviour, residence, inheritance, remarriage and employment opportunities (Chen and Dreze 1992; HelpAge International 2000b).

In summary, debates about the situation of the elderly in the context of developing countries do not revolve around the actual facts of change. There is no doubt that major socio-economic transformations have accompanied demographic transition in these societies as both cause and effect. What is contested instead is how these macro-level changes are transmitted at the micro-level and their implications for inter-generational relationships within the household. The family has in essence become a shell institution in so far as the terminology has remained the same yet the basic character of families is changing (Giddens 1999). Macro forces are producing strains on intra household resource allocation and relations, even if household composition in terms of extended family in certain contexts is not changing. In this context, we go on to explore some of the implications of these changes on the elderly cohort – implications only tentatively forwarded thus far in the literature on ageing.

### 2.5 Inter-generational contracts in the context of transition: breakdowns, continuities and renegotiations

Our analysis so far suggests that while the impact of demographic transition and socio-economic change has been extremely diverse, there is certainly a sense in the literature that they have impacted on inter-generational contracts in ways that leave the elderly less secure than before. In this section of the paper we will concentrate on the more micro-level and empirical evidence emerging from the research on ageing in order to test this proposition. In reviewing the effects of social and demographic change on the elderly, and their ability to deal with or adapt to these effects, emerging trends can usefully be thought of as representing breakdowns, continuities and/ or renegotiations in the inter-generational contract.

A number of studies report an increase in physical and emotional abuse against older people, although rarely accompanied by any analysis into its nature or context (Beales 2000; Brown 1999; Varley and Blasco 2000a: urban Mexico). In addition, the feelings of disenfranchisement, role loss, low self-esteem and social/psychological isolation reported by the elderly in participatory surveys appear to be rooted in changing intergenerational relationships (HelpAge International 2000a; Singh 1999; UN 1994), repercussions of an identity 'crisis' that is being linked to demographic transition. The change is felt all the more so by the elderly, as they spent their youth and adulthood faithfully enacting the implicit contracts with their elderly parents, in the expectation that they would receive the same attention in their old age. Such evidence probably helps to explain why there has been a discernible shift in perception of the elderly in the Third World as well-integrated members of family life to one which sees them as an emerging 'vulnerable' group.

An interesting example of how the nature of changes in familial contracts may be operating to the detriment of the elderly, is provided by the case of fully state-funded, universal pensions for South Africa and

Namibia's elderly populations.<sup>12</sup> There is an argument that pensions increase the bargaining power and the value of the elderly in the family, and hence their consumption allowance and self-esteem. The contribution of pensions to the relief of poverty of the extended family is proven in both Namibia and South Africa, and arguably more effective than many other development efforts (Ardington and Lund 1995; Devereux 2001; Morgan 1991). Burman's research with black South African elderly found that very often children survived on the pensions of elderly parents. The dependence of the family on pensions ensured the survival of the multigenerational household, and gave the elderly a modicum of power within it. However, there were also many cases where single parent families or families with unemployed members would leave their children to be raised by their grandparents on their pension money; indeed the pension may have allowed adult children to seek work elsewhere and leave grandchildren with grandparents (Ardington and Lund 1995; Burman 1996). While the value of the pension to the household becomes significant, the grandparents are not ensured any assistance in return from the children's parent/s. Subsequently, Burman finds that the malnutrition among African pensioners is compounded by the number of dependants they have to look after and raise. The elderly can also be subject to physical and psychological abuse as a result of the importance placed on this form of income (Devereux 2001; Heslop 1999).

Income is therefore not necessarily sufficient to guarantee old age security (Heslop 1999), and can in fact exacerbate the elderly's non-income related and more qualitative forms of deprivation. Alternatively they cease to depend on the income of their children and become relatively independent, as Chan discovers in the case of Vietnam households in which pensions are prevalent (Chan 1999). Again, this can heighten the elderly's sense of isolation. The introduction of state pension schemes therefore represent the formulation of social contracts between the state and the elderly, but the efficacy of that contract (however legally binding or guaranteed it is) is determined by how it interacts with the implicit contracts made within the family, or the influence one has over the other.

Where elderly parents do not have any economic leverage over their children, and when the children themselves are poor and landless, the chances that old age support will be forthcoming is much diminished. This is suggested by Panda's survey of rural Orissa which found that elderly people in landless and low income households were more likely to live alone or with spouse only, and less likely to live with married sons (Panda 1998). The evidence from Bangladesh on this issue is contradictory. According to Amin *et al.* (1995),

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A small proportion of developing countries currently offer pension programmes for its old-age citizens. Those with contributory pension systems, as with solely private pension systems, benefit largely urban formal workers who can afford to deduct regular contributions from their wage or defer consumption (or state sector workers, as in China — Gorman 1995). These pensions are often heavily taxed and inadequate to meet the recipient's needs due to inflation (Rwezaura 1989). There is also a bias against women. The ability of women to make lengthy pension contributions is restricted due to their frequent gaps in formal employment (child birth and rearing), their low and unreliable incomes, and informal activities. In 1994, 90.6 per cent of those aged over 60 in Peru who received pensions were men. In addition, on the death of a male spouse, widows receive only a reduced survivor's pension (Clark and Laurie 2000). South Africa and Namibia are two of few countries (others include Cuba and Nicaragua) to provide fully state-funded, universal pensions to its elderly population (Devereux 2001).

The shrinking land base relative to a growing population has weakened the economic foundations of patriarchal authority, loosening the important familial ties that make insurance obligations work. Nonetheless, the absence of meaningful institutional alternatives and the longstanding culture of familial support probably sustain a strong social obligation to care for elderly parents even when the economic base is eroded.

However, Adnan suggests that deteriorating conditions over several decades has led to 'an extreme breakdown' in social organisation, manifested in the 'disintegration of the family unit itself', households becoming decomposed into their constituent individuals, 'with each attempting a separate avenue of survival – whether adult, child or elderly' (Adnan 1990: 165). In situations of crisis, the elderly are left to fend for themselves, by begging or starving.

There are however a number of circumstances under which older members of the family may continue to enjoy its support. Where they own assets which they have either inherited or built up in the course of their productive years, they are likely to exercise some degree of bargaining power within their family networks and the capacity to mobilise their support. Control over valued assets creates a 'bequest' incentive in the relationships between the elderly and the young: parents can use inheritable assets to induce higher levels of care and monetary transfers or to penalise neglect (Hoddinott 1992; Lee et al. 1994). Inheritance rights can have a large effect on patterns of inter-generational exchange (Lloyd-Sherlock 2000). Hoddinott provides evidence from Western Kenya of how parental wealth (principally land) acts as an inducement for sons, to whom land is bequeathed, to continue or increase their transfers to elderly parents: parents are in a position to act 'manipulatively' (Hoddinott 1992). Where land is no longer a key asset, access to other economic resources can also play a role.

Evidence of the importance of elderly bargaining power is evident in Kochar's study of intra-household allocation of medical expenditures in rural Pakistan. She finds that medical expenditures on the elderly are closely correlated with the elderly's individual income and wealth, and their relative contribution to that of the household. Declining medical attention further weakened the health of elderly parents, reducing their ability to make any contribution and reinforcing their status as dependents (Kochar 1999). Vlassoff et al. find a similar pattern emerging. In a survey of rural India, almost half the men had not provided medical care to ailing fathers, and many did not know if their fathers had even been treated. Furthermore, while 52 per cent of the elderly reported that their sons provided for their medical needs, as many as 42 per cent reported financing such expenditures themselves (Vlassoff and Vlassoff 1980, cited in Kochar 1999). Recent research from South Asia documents the anxiety expressed by older people over the realisation that decision-making authority within the household was becoming based increasingly on economic contribution rather than the traditional norm of respect for old age (HelpAge International 2000a).

With growing monetisation of the economy and the diversification of livelihoods out of farming, partly in response to population pressure on land, deducation has become the key source of upward mobility and a key form of investment among modern farming families (Caldwell, Reddy and Caldwell 1982; Khasiani 1994; Lee et al. 1994; Sando 1986: Taiwan, cited in UN Secretariat 1994). In Kenya, demand for education has increased massively due to land scarcity and the consequent requirement to seek wage employment. One estimate is that 80 per cent of the income of the Maragoli in East Africa goes on education, with peasants making the necessary sacrifices to educate their children because education provides the greatest potential financial return to the family unit (Hughes 1991). The reduction in family size associated with fertility decline will enable parents to invest more heavily in their children and improve the chances of children earning a better livelihood and making more substantial material contributions to their parents in old age (Balakrishnan 1996b; Knodel et al. 1992).

The effects of this 'quantity-quality' trade off are not clear. As already noted, Caldwell (1982) and others have suggested that the westernisation of education underlies the emotional nucleation of families, their description of which suggests a concentration of focus on children by working age parents and away from their own aging parents. However, evidence from Bangladesh suggests that parents themselves see educating their children as an aspect of their obligations, a 'modernisation' of inter-generational contracts, not only expected by their children but also conducive to strengthening children's sense of duty to parents in their old age (Kabeer 2000). This modernisation of the contract may however be gender-specific. Lloyd and Gage-Brandon's (1992) study of the Ghana Living Standards Survey highlights that even in contexts of declining fertility, girls are withdrawn from school to care for younger siblings, while boys' education is favoured by mothers because of their greater dependence on their children in old age (men can take on younger wives), and their expectation of higher monetary returns from investment in sons, thus perpetuating traditional sex roles. Greenhalgh (1985) notes similar behaviour in the context of Taiwan.

However, while in some cases inter-generational contracts may be transformed in ways that reinforce traditional gender roles, in other cases, they may go against gender norms. While in most patriarchal cultures, parents look to sons for support in their old age, there is evidence that when they lack the leverage/family size to ensure that this happens, they are increasingly turning to daughters. A participatory survey in the strongly patriarchal Bangladesh conducted by HelpAge International (2000), found older people living with both sons and daughters, especially in urban areas. A household survey carried out in urban Bangladesh and West Bengal also supports this finding (Kabeer et al. 2002). Similar findings were reported for China by both Yu et al. (1990) and Greenhalgh (1994) based on a study carried out in 1988. According to Greenhalgh, before the drastic consequences of its one child policy, China was on the way to becoming a society in which daughters

This is not a uniform phenomenon, of course: in some parts of Africa particularly, land continues to constitute a valued resource controlled by older generations, since the poor remain largely excluded from new occupational opportunities (UN Secretariat 1994).

were finally being given value by parents. Many of the women interviewed by Greenhalgh in her study expressed an active preference for at least one daughter. Parents were increasingly losing faith that their sons could be counted on to observe their filial duties while at the same time, many parents expressed the belief that daughters might be more reliable in providing emotional support in their old age. Increasing incidence of village endogamy allowed parents to keep in touch with married daughters in a way that had not been possible in earlier times. As daughters gain economic power, it may also be (as Lee et al. 1994 suggest in the case of East Asia, and other studies have shown) that daughters' families increasingly transfer financial and non-financial resources to elderly parents (Lee et al. 1994). This can also work the other way. The implications of fertility decline in Thailand for coresidence is found to be limited because of the relative flexibility among Thais with respect to the gender of coresident adult children: they may prefer daughters but families adapt to their particular situation (Knodel et al. 1992).

Emerging evidence of shifts in mother-in-law and daughter-in-law relations in South Asia can also be seen to be indicative of the changing content and context of familial relationships. Vera-Sanso's study of low-income urban settlements in Chennai (India) uncovers an inversion of the typical dominant mother-in-law and submissive daughter-in-law order found with landed rural families. Mother-in-laws have become wary of antagonising daughter-in-laws out of the insecurity and fear of being left alone in old age. In order to maintain more encompassing households, they undertake various strategies one of which may be to make the life of daughter-in-laws less onerous than they traditionally have been (Vera-Sanso 1999). It kels (1990) also finds low resource elderly Chinese women to be the most compliant when it comes to family affairs. However, again, the degree to which this is necessary or relevant will depend on the composition of the family (particularly the number of sons) and the elderly's control over assets. Inter-generational relationships are therefore dynamic, and changes in the opportunities and expectations of any one generation have profound implications for the positioning and coping strategies of other generations (Vera-Sanso 1999).

The other possibility available to ageing parents who lack material leverage over their children is to elicit their support through a variety of contributions to household livelihoods. Large numbers of elderly people in the developing world remain economically active well past the age of 60 (Gorman 1995; Hugo 1997; Khasiani 1994; Randel *et al.* 1999). Such activity reduces the pressures they put on family support, either because they defray their own costs of subsistence or because they are able to make a net contribution to family welfare. Such activity is particularly true of the rural primary sector (agriculture, fisheries, forestry etc. Sen 1994) and urban informal sector (Heslop 1999: doorstep trading of older women in Ghana; Lloyd-Sherlock 2000), in which it is easier to increase the working life span in response to changing life expectancies (Collard 2000) or

This may even include resisting the temptation to press daughter-in-laws into producing grandchildren (Balakrishnan 1996a).

Elderly parents can be the central contributors to the economic support of multi-generational households. It is mostly assumed that this will not be the case (UN Secretariat 1994; Varley and Blasco 2000a).

family needs. In a survey of rural Orissa (India), three-fifth's of males and one-third of females over 60 years of age were found to be economically active (Panda 1998). In Zimbabwe, 82 per cent of men and 70 per cent of women over 60 are also economically active (HelpAge International 2001). In China, as adult sons and daughters migrate to the cities in search of work, it is often the elderly who take over responsibility for agricultural production, thus keeping the family farm going.<sup>16</sup>

Also important is the contribution of the elderly to unpaid reproductive tasks. Older women for example often support younger relatives in child minding and housekeeping (thereby freeing up the labour and educational opportunities of younger female generations). In certain instances, elderly parents may be solely responsible for the children of migrated adults or for orphaned children (particularly in the context of Africa's AIDS pandemic) (Gorman 1995). In such cases, the burden placed on the elderly can be intolerable (Burman 1996). However, their contribution can be seen as a means of ensuring incorporation into the family structure (Burman 1996), an attempt to perpetuate multigenerational co-residence (Martin 1990) or even a response to the changing nature of familial arrangements and support. In all cases, it is evidence of increased pressure for the elderly to remain active, and economically active, given the higher value attached to income earning potential, in response to the demographic changes which are transforming Third World families (Marcoux 1994). However, it is difficult to judge on the basis of the evidence available what the implications of working into old age are for the welfare of the elderly, whether it enhances their sense of leading useful lives or whether it erodes their physical well-being.

#### 2.6 Conclusion

Inter-generational contracts prior to demographic transitions tended to be based on a net inter-generational flow of resources which favoured the elderly, including the support of children in old age. The terms of these contracts are now undergoing change and contestation to the extent that the elderly are emerging as a new vulnerable group — not perhaps as extensively and visibly as some other forms of discrimination, but in sufficiently large numbers to constitute a problem for policy makers. Fears over the declining ability and motivation of families to provide care and support to elderly generations therefore appear on the whole to be well founded. 'The term family care has a beautiful and noble connotation, but, in many cases, it is accompanied by the painful sacrifice of the caretakers, and the quality of care is frequently poor' (Martin 1990). Co-residence is taking on less of an obligatory character. In turn the expectations of future older cohorts will be dramatically altered (Martin 1990). The inter-generational contract is undergoing a 'complex reconstitution' which is creating new and alternative family relations. The 'governing rules' for these are still evolving (UN Secretariat 1994) and will continue to do so as demographic transition proceeds.

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It is worth noting however that the mechanisation of production and the increased literacy of younger cohorts will threaten the elderly's ability to remain economically active well into old age (Brown 1999; Lloyd-Sherlock 2000; Restrepo and Rozental 1994).

An examination of the implicit contracts of the family help to throw some light on how these rules are changing and their implications for the distribution of vulnerability among family members. Understanding the terms of exchange can provide a point of entry for social policy to address these vulnerabilities. Our discussion suggests that vulnerability in the case of the elderly reflects the interaction of cultural (identities, values and norms), economic (contributions and assets), physical (e.g. disability and frailty) and demographic (stage of life cycle) factors. However, the vulnerability of the elderly is not entirely a matter of family relationships. It also reflects the workings of extra-household institutions like the market and the state. Markets systematically devalue certain kinds of contribution, very often the kinds of contributions that the elderly are able make to society (the wisdom of experience, maturity of judgement and so on), thereby relegating the qualities that come with age to the sphere of the unproductive. Social policies remain an important means by which this privatised construction of new forms of disadvantage can be countered. Unfortunately, however, too often it has been based on pre-conceptions about the family and merely contributed to the marginalisation of the elderly. While a detailed examination of social policy for elderly populations remains beyond the remit of this paper, the third section of this paper briefly touches upon the ways in which social policy can impinge upon elderly well being in the context of changing inter-generational contracts and the ways in which social policy can adjust to the new realities.

#### 3 What does all this tell us about social policy?

While old age insecurity may be constructed in the context of family relationships, it has often been reinforced by the practice of social policy. Indeed social policy has tended to be informed by a view of the household that mirrors the views of its dominant member as to the identities of producers and dependants, the valued and the devalued. The situation of the elderly is a case in point. Within the idealised notion of the family, they have been positioned as a homogeneous, passive group, economically dependent and well taken care of within harmonious multi-generational households. These assumptions combine the myth of the altruistic family with constructed 'truths' about old age largely based upon natural characteristics.

As a result, social policy has been unresponsive to the real nature of what the elderly contribute to the household and the role they perform or may have performed in the past. The erosion of the dignity and agency of the elderly within the family is thus reproduced in the wider society through policy indifference to their needs and rights. As Heslop points out,

Public and private service delivery structures commonly mitigate against the potential of older people to participate as active and valued members of their societies. Older people face barriers accessing the most basic health and sanitation facilities, and are frequently denied access to bank loans and credit schemes as well as appropriate education and information.

(Heslop 1999)

This discrimination in the provision of services, favouring those who are perceived as the productive cohorts, is felt most severely by the rural poor. In addition, where market or market-like insurance mechanisms have been introduced, the poor elderly may be explicitly excluded from cover on the basis of cost effectiveness (Lloyd-Sherlock 2000).

There is clearly an increasingly important role for social policy to play in countering the exclusionary implications of the changing inter-generational contract. Some of the problems associated with reliance on the family as the only form of support in old age have been documented in this paper. It cannot be taken for granted any more, even if it could in the past, and where it is forthcoming, it is often insufficient both in the degree and quality necessary for the welfare of the elderly. There are two major fears driving continued state reliance on the family. Firstly, investment in the elderly is seen as an inefficient use of resources, given their lack of 'productivity', acute resource constraints and the perceived high-cost of social support for this segment of population. Secondly, it is feared that Western style values and institutions (welfare state type interventions/ formalised social support) will erode the strong cultural emphasis on family duties and the traditional support system for the aged (Kwon 1999; Sen 1994).

However, the reality is that many elderly can, and do, contribute to their own welfare and that of their households and communities. The skewed emphasis on the consumption of the elderly and economistic definitions of 'production' have served to obscure their critical role in the realm of production as well as reproduction (Messkoub 1997). Many elderly people in the Third World continue to participate in productive work as long as they are able to: 'retirement' only takes place with failing health. Others substitute for prime age adults in a range of expenditure saving activities as well as in the care of children. The reality is also that family support for the elderly is clearly falling short of both need and expectations. The family (however culturally vigorous) can no longer be self-sustaining in the context of widespread poverty and rapid change. Continued reliance on families for old age provision is a regressive approach, favouring the wealthy and educated over the poor (Restrepo and Rozental 1994). It is also a gender-biased approach since where the care of the elderly is required, it is generally provided by women and girls. Finally, there are categories of elderly who cannot be 'reached' through family structures, such as childless couples and often widows.

However, it is not sufficient to simply replace private provision with dependence on the state. Where the state has stepped in, it has often been in stigmatising ways, treating elderly and other welfare recipients as dependents on public charity (Sunde and Bozalek 1995: South Africa). A preferred option would be to move away from the formal-informal dichotomy and to seek ways of combining the strengths of different forms of social provisioning. The state and the family do not need to be mutually exclusive but can be brought together in a partially socialised inter-generational contract in which each has a role to play.

Despite the various qualifications expressed in this paper, the family still represents a key strategic resource for social policy to harness and complement in the care and support of ageing populations. It remains a site of affective relations where the physical care of the elderly is most likely to be provided in ways

that do not suppress their humanity, particularly if such provision can be bolstered with state support in situations of poverty. Moreover, the likelihood that the state will be in a position to provide a sufficient level of transfer to ageing populations is remote in many of the world's poorer countries. More realistically, the state may be in a position to assist and encourage families in their attempts at meeting their own needs and to do so in inclusive ways. If the family benefit as a whole, then the value of the elderly is raised. However, simply targeting the family may not adequately address anomalies in the allocation and distribution behaviour of families.

Concerns have been expressed that formal measures such as pensions may 'crowd out' informal family support by, among others, the World Bank. This may be a valid concern particularly as the younger working generation may be paying for welfare provisions through their increased tax burden. However, there is little evidence to support it. In any case, the impact of pensions on familial support is likely to be empirically insignificant, given that they are not relevant to the vast majority of the elderly poor in the developing world. Nor are pensions necessarily the most inclusive approach to the support of the elderly since they rarely take account of the diversity of their situations and the needs these give rise to (Heslop 1999). This includes the situation of widows, childless couples, parents of migrant children, grandparents supporting grandchildren, and rural elderly in general whose level of income support may be of a seasonal nature. Finallly, an overemphasis on pensions and welfare targeting tends to negate other more structural, less well-trodden policy options for supporting the elderly which have the potential for addressing some of the dependencies associated with old age (Paul and Paul 1995): addressing the structural inequalities of all women and the particular binds on elderly women of a legal nature; removing barriers to loans, credit and skills training for the elderly that constrain continued labour force participation; the support and promotion of associational resources among the elderly; and promotion of the idea of the rights of the elderly as the basis of public policy.

#### 4 Conclusion

The ageing of Southern populations is already underway but our understanding of its implications remain tentative. While the elderly have begun to emerge as a new vulnerable group, it is by no means clear that they are universally at risk. There is strong evidence that their status has been eroded in certain contexts. As a result, the elderly are negotiating changes in familial relationships or their own individual way of living, not all of which result in net benefits. In other contexts, by contrast, inter-generational solidarity within the family remains resilient. However, we do not have enough evidence to know whether these are inconsistencies in findings, whether they relate to different contexts or whether they reflect differences in methodology.

The elderly have tended to be subsumed within an aggregated household, their needs and interests are rarely identified and their contribution to family life largely hidden. Examining the organisation of power within intra-household relationships is complicated when the focus is on the elderly. Women and children have historically been subordinated within the family by virtue of gender in one case and age in the other. The elderly, however, have 'traditionally' enjoyed relatively high status within the familial hierarchy by virtue of their age, often combined with gender. There is no long established pattern of discrimination and exclusion. The fact that it may be changing in some contexts is therefore throwing up quite literally unique challenges.

Rather than respond to perceptions of an impending crisis, the situation demands policy informed by the realities on the ground. The implications of demographic transition vis-à-vis ageing populations in the South have not been sufficiently researched to provide such information. In this 'exploratory' paper, based on a thorough review of secondary literature, we have attempted to lend coherence and consistency to the ageing question by framing it around the concept of familial contracts, and by differentiating between the pretransition and transitional situations of the elderly in developing countries. In doing so, it has become apparent that the literature on ageing is littered with contradictions, claims and counter-claims, none of which add much to our understanding of the elderly cohort in the context of life-cycles and demographic-socioeconomic change. The different stages of demographic transition, cultural context and pressing economic concerns have hitherto been treated as separable variables in the study of ageing in developing countries. Future research (particularly of a longitudinal nature) into the interaction of these variables and their impact upon family-based arrangements for the elderly is therefore central to exposing the nature and intensity of elderly vulnerability. To what extent does this perceived vulnerability crosscut class, gender, or culturally varied family forms and norms? To what extent are we in a position to construct a 'geography of ageing', charting patterns of elderly marginalisation as reflected by the varying stages of transition and varying patterns of kinship? To what extent are current macro forces disproportionately affecting the elderly cohort in ways that undermine their status within the household?

Whatever the findings of future research, some degree of socialisation of the inter-generational contract is likely to be inevitable if only to promote a greater degree of multi-generational consensus. A public calculus as to what constitutes appropriate care and security for a nation's elderly population, complemented by a strong advocacy movement and public debate concerned with the rights of the elderly, can help to promote the empowerment or independence of the elderly as well as to influence the private calculus of the working generation as to how they should treat their elderly relatives. Adjustment between older and younger generations needs to be encouraged, in order to foster an age-integrated society, in parallel with the adaptations already being forced upon people in the context of rapid change.

### **Appendix A**

Table A1 Demographic transition and the ageing of the population: the global picture

	Av. annual <5 mortality growth rate (%) 1000)		Crude death rate (per 1000)		Crude birth rate (per 1000)		Life expectancy at birth (years)		Survival to age 65 (% of cohort)			
	1980 - 1998	1998 - 2015	1980	1998	1980	1998	1980	1998	1980	1998	Male 1997	Female 1997
World	1.6	1.1	123	75	10	9	27	22	61	67	69	78
Low income	1.9	1.3	150	92	11	9	31	26		63	64	69
Low income excl China and India	2.4	1.9	177	125	16	12	43	34	51	57	52	58
East Asia & Pacific	1.5	0.8	82	43	7	7	22	18		69	69	76
Europe and Central Asia	0.6	0.1		26	10	11	19	12	68	69	59	80
Latin America & Carib.	1.8	1.3	78	38	8	6	31	23	65	70	67	81
Middle East & N.Africa	2.8	1.8	136	55	12	7	41	27	59	68	68	73
South Asia	2.0	1.5	180	89	14	9	37	28	54	62	62	65
Sub-Saharan Africa	2.8	2.2	188	151	18	15	47	40	48	50	40	46

Source: World Bank (2000)

	Population aged 65+ (% of total)		Women aged 65+ (per 100 men)		Average annual population growth rates (%)					
	1998	998 2015	1998	2015	Age 0-14		Age 15-64		Age 65+	
					1980- 1998	1998- 2015	1980- 1998	1998- 2015	1980- 1998	1998- 2015
World	6.8	7.9	128	122	0.8	0.1	2.0	1.4	2.3	2.0
Low income	5.0	5.9	109	108	1.0	0.3	2.3	1.8	3.0	2.3
Low income excl China and India	3.4	3.7	116	118	2.0	1.1	2.7	2.5	2.7	2.3
East Asia & Pacific	6.1	8.0	110	109	-0.2	-0.6	2.1	1.2	3.2	2.5
Europe and Central Asia	10.6	11.7	181	165	-0.1	-1.3	0.8	0.4	1.3	0.7
Latin America & Carib.	5.2	6.6	129	136	0.7	-0.1	2.5	1.8	2.7	2.7
Middle East & N.Africa	4.0	4.7	110	110	1.9	0.4	3.3	2.5	3.4	2.8
South Asia	4.4	5.2	104	106	1.5	0.2	2.4	2.1	2.8	2.5
Sub-Saharan Africa	2.9	2.7	126	120	2.7	1.6	2.9	2.7	2.8	1.8

Source: World Bank (2000)

Table A2 Annual growth rates in the populations of older people 1995–2020

Region		Growth rate (%)					
	All ages	60 and over	80 and over				
World	1.20	2.48	2.67				
Less developed regions	1.43	3.05	3.62				
More developed regions	0.16	1.42	1.75				
Africa	2.42	3.15	3.68				
Asia	1.16	2.90	3.57				
Europe	-0.11	1.06	1.46				
Latin America and the Caribbean	1.29	3.29	3.70				
North America	0.75	2.13	1.57				
Oceania	1.26	2.46	2.43				

Source: UN Population Division (1996) reproduced in Randel et al. (1999).

Table A3 The proportion and number of people over 60 in selected developing countries

Country	% of people over 60 in 1996	% of people over 60 in 2025	Number of people over 60 in 1996 (millions)	Number of people over 60 in 2025 (millions)
China	9	20	115	290
India	7	12	62	165
Mexico	7	13	6	18
Egypt	6	10	4	10
South Africa	7	10	3	6
Brazil	7	16	11	31

Source: US Bureau of the Census (1996) reproduced in Randel et al. (1999).

Table A4 Life expectancy at birth – estimates for 1990–1995 and assumptions to 2150

Region	Life expe	ectancy for	men (yrs)	·	Life expectancy for women (yrs)				
	1990- 95	2020- 25	2070- 75	2145- 50	1990- 95	2020- 25	2070- 75	2145- 50	
World	62.2	69.7	77.2	83.4	66.5	74.5	82.2	88.2	
Africa	50.4	62.8	74.9	81.8	53.5	66.1	79.3	86.2	
Latin America and the Carib.	65.3	71.8	77.7	83.7	71.8	78.2	83.8	89.8	
China	66.7	72.6	78.3	84.4	70.5	76.7	82.9	88.9	
India	60.3	69.3	76.5	82.7	60.6	72.4	81.2	87.5	
Other Asia	62.7	71.3	77.9	83.9	66.6	75.8	82.6	88.5	
More developed regions	70.4	75.1	79.9	86.0	78.0	81.6	85.8	91.8	

Source: UN Population Division (1996) reproduced in Randel et al. (1999).

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