

# **Population and Ageing in Africa: a Policy dilemma?**

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## Context and data

- *By 2020 more than 1000 million people aged 60 years and older will be living in the World, more than 700 million of them in Developing countries.*

One of the main features of the world population in the 20<sup>th</sup> century has been a considerable increase in the absolute and relative numbers of older people in both developed and developing countries. This phenomenon is referred to as “population ageing”. From a demographic point of view population ageing is a result of both mortality and fertility: fewer children are born and more people reached old age.<sup>1</sup>

Over the last fifty years mortality rates in developing countries have declined dramatically raising the average life expectancy at birth from around 41 years in the early 1950s to almost 62 years in 1990. By 2020, it is projected to reach 70 years. More recently sharp falls have also occurred in birth rates in nearly all developing countries except for most of sub-Saharan Africa.

Over the next quarter century Europe is projected to retain its title of “oldest region in the world”. Currently elderly people represent around 20% of the total population now and will represent 25% by 2020; 23% in North America, 17% in East Asia, 12% in Latin America and 10% in South Asia.

In developed countries, population ageing has evolved gradually as a result of an earlier decline in fertility and improving living standards for the majority of the population over a relatively long period of time after the industrial revolution. Technological breakthroughs in the field of medicine, including the development of new and effective drugs and vaccines, contributed to this process much later. In developing countries, population ageing is occurring more rapidly because of rapid fertility decline and an increasing life expectancy due to medical interventions based on the use of advanced technology and drugs. These interventions have provided effective means to treat and

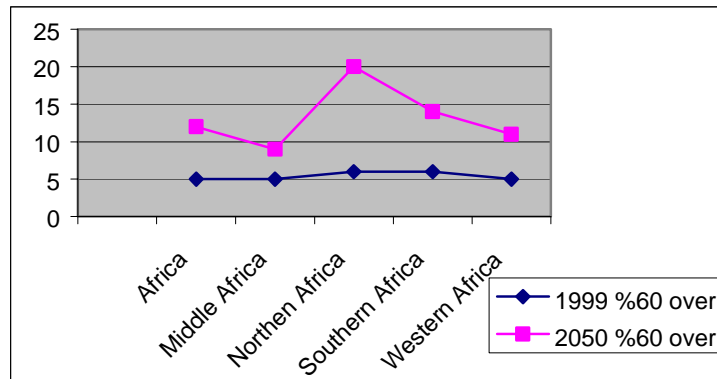
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<sup>1</sup> The ageing of a population is different from individual ageing. Ageing of individuals may be measured in many ways including chronological age, degree of physical or mental functioning or performance of given social roles. Thus, perceptions of old age vary greatly between societies, conditions of life (favorable or unfavorable), life expectancy, poverty and other factors.

Ageing is a natural process of any population. Population undergoes a change in age structure resulting from a shift in such demographic variables such as fertility, mortality and migration. Ageing is a result of a combination of declining mortality (increase in life expectancy) and declining fertility; leading to structural changes in the age structure of the population. The term of ageing of population refers to changes in the age structure when the weight of the adults and the elderly is higher in the total population in general than the weight of the young population.

The statistical definition, based on the retirement age, allows international comparisons. But this definition is of limited applicability because of the limited modern sector employment in general and the low employment rate of older women.

prevent many diseases that used to kill people prematurely. Also of importance is the fact that population ageing in the developing world is accompanied by persistent poverty.



- *Between 1990 and 2025 the rate of increase in the number of the older people in developing countries is expected to be 7 to 8 times higher. In some developing countries, it is expected an increase of between 200% and 300% in their elderly population over a period of only 35 years.*

The previous sections clearly indicate that the shift of population age structures from young to old populations will be faster in developing countries, including Africa, than in the more developed regions despite the fact that the youngest populations will still be in Africa. But attention should be drawn here to the pace of changes of the population 60 years and over and in particular the absolute increase of this group.

The demographic projections indicate that the demographic transition will proceed much more rapidly in developing regions than it did previously in developed ones. The recent and continuing fertility decline in many developing countries today is faster than the gradual decline experienced by the currently developed ones implying that the pace of population ageing will exceed the pace in the developed countries in the past. *Ageing is now a global problem, affecting developing countries as well, which needs planning and central policy-making.*

Although Africa will remain relatively young throughout the period 1995 to 2050, it is clearly reflected that while its young dependency burden will be reduced by 57%, its old age dependency burden will increase by 93% within the same period.

As in other parts of the World, in African countries, there are more elderly females than males especially for age groups 65-69 years, 70-74 years and 75 years and over. Indeed with increasing life expectancy, it should be expected that there would be even more elderly females surviving. Hence, elderly females will bear the bigger share of constraints caused by lack of appropriate policies and plans aimed at improving the welfare of the population (see Sections on Population Policy and Social Security).

Finally, existing data shows that while the ratio of the population aged 60 years and over to the population aged 0-14 years was 0.169 in 1950 and 0.212 in 1995 (a change of 25% only), the ratio will be 0.914 in the year 2050 (a change of 441% from 1950 and 331% from 1995). The change between 1995 and 2050 is the highest among all the world regions and sends a signal that Africa should seriously start planning for its elderly population.

## ***Reflection of elderly concerns in selected NPP in Sub-Saharan Africa***

In the following section, we aim at seeking the readiness of some African countries to cope with respect of the changes occurring in the age structures. The main source is the National Population Policy that addresses the critical population issues of the country. With exception of few countries, others are silent on this matter and focus on the current main component of the population: the youth. Fertility decline and maternal-child care are the targets of NPPs, with recently a shift to HIV/Aids impact mitigation.

<b>Country</b>	<b>Priority Policy Actions related to elders</b>
Kenya 2001	<ul style="list-style-type: none"> <li>- Formulate long-term programmes to ensure the socio-economic support and security for the elderly</li> <li>- Promote policies, programmes and strategies to ensure the realization of the rights of all persons with disabilities and their participation in all spheres of life; and</li> <li>- Deliberate measures shall be taken to alleviate the special problems of the elderly and persons with disabilities with regards to low income and unemployment</li> </ul>
Nigeria 2001	<ul style="list-style-type: none"> <li>- To accelerate the integration of the elderly and persons with disabilities into the development process</li> <li>- Appropriate strategies shall be developed to integrate the elderly into relevant aspects of national life</li> <li>- Appropriate measures shall be drawn to the traditional role and responsibilities of the family in the care of the elderly. Every effort shall be made to assist the elderly live a normal life in the community</li> <li>- Community-based social workers shall be trained to meet the special needs of the elderly, including reproductive health needs</li> <li>- A national advisory council for welfare of the elderly shall be established to expand and sustain meaningful pension, social security and other appropriate means of livelihood</li> </ul>
Chad 1994	- None
Mali 1991	- None
Burkina Faso 1991	- None
Liberia 1988	- None
Tanzania 2000	<ul style="list-style-type: none"> <li>- To promote the well-being of the elderly and people with disabilities</li> <li>- Encouraging the private sector, NGOs and religious organizations to invest in provision of social services especially health for the elderly</li> <li>- Establishing social security measures that address problems of the elderly</li> <li>- Encouraging traditional community-based support networks to the elderly</li> </ul>

Country	Priority Policy Actions related to elders
Mauritius	<ul style="list-style-type: none"> <li>- Encouraging the younger generations to keep their old relatives within their family</li> <li>- Facilitating old people to stay as long as possible in their own home</li> <li>- Increasing the number of residential homes, especially for the most dependent</li> <li>- Different pensions and facilities provided to persons aged 60 and over: i) Basic Retired Pension to all persons aged 60 and over, ii) Contributory Retirement Pension, payable to any employer in the public or private sector; iii) Allowances under Social Aid</li> <li>- Housing and family support: government advocates a policy favoring the keeping of the elderly within the family that is in line with the strong family norms which prevail among Mauritians of all origins</li> <li>- The Government is striving to encourage dialogue and promote solidarity between generations, through civic education to achieve the best course of action</li> <li>- Leisure and recreational activities</li> <li>- Conclusion: The government of Mauritius has already embarked on short, medium and long term planning to manage the ageing process</li> </ul>
Gambia 1992	- None
South Africa 1998	- None
Uganda 1995	<ul style="list-style-type: none"> <li>- Increasing awareness among the public on the special needs of the elderly with emphasis on the traditional role and responsibility of the family in the care and development of the elderly</li> <li>- Providing the elderly with appropriate facilities, amenities and skills to enhance their contribution to the national economy</li> <li>- Training of community-based personnel to meet the special needs of the elderly</li> <li>- Expanding, improving and sustaining meaningful pension, social security and other appropriate community-based schemes for the elderly</li> <li>- Enacting and enforcing laws to address the rights and needs of the elderly, and</li> <li>- Establishing a National Advisory Council on the elderly</li> </ul>
Ethiopia 1993	- Significantly improving the social and economic status of vulnerable groups –women, youth, children and the elderly
Burundi	- None
ICPD+5 1999	<ul style="list-style-type: none"> <li>- Governments should continue to examine the economic and social implications of demographic change and how they relate to development planning concerns and the needs of individuals</li> <li>- Support research and develop comprehensive strategies at the national, regional and local levels to meet, where appropriate, the challenges of population ageing. ..Invest more resources ...in training and capacity-building in social policies and health care of older persons, especially the elderly poor, paying special attention to the economic and social security of older persons, in particular older women</li> <li>- Support systems to enhance the ability of families and communities to care for older family members; the ability of the elderly to care for family members and community victims of HIV/AIDS; and generational solidarity with the goal of maintaining and improving social cohesion</li> </ul>

From the above tables, it confirms the findings that development programmes in poor countries have ignored population ageing, failing to emphasize the rights of older people and their need for income, housing, health care, and security. Indeed, if the NPPs reflect elderly concerns, development programmes remain silent as well as the poverty reduction strategies (with the Mauritius exception). Instead, development agencies have contributed to accelerated population ageing through fertility control and effective maternal and child health care but choose to ignore their long-term successes- elderly people.

### ***Reflection of elderly concerns in other development policies, including Poverty Reduction Strategies, in Sub-Saharan Africa***

It is important to start this section by addressing the four main reasons for which ageing issues have not been a major concern in developing countries:

1. Pre-industrial societies are predominantly rural societies where the economic and political position of older persons relative to younger ones is generally strong; where families by both structure and necessity are supportive of needs in old age; where older people are able to remain economically productive for a greater part of their lifetime; and where much of the population is outside wage-dependent markets.
2. The aged are a small proportion of the total population, given the relatively low life expectancy and high fertility rates, compared with developed nations.
3. Government development priorities favor expenditures that invest in the long-term productive potential of the young.
4. The elderly are often viewed (probably incorrectly) as impending development because they are more considered resistant to change and less adaptive “human capital”.

However, governments in many developing countries have now enacted social insurance pension schemes. A variety of factors have influenced their adoption ranging from imitation of western societies/practices to new efforts to deal with the growing economic insecurity among the elderly resulting from industrialization and international market fluctuations. Most importantly, the traditional sources of economic insecurity confronting individuals and families have not diminished as these countries progress, creating continuing demands for effective social protection programmes.

In recent years, social security systems have been the subject of increasing concern in policy discussions. Slow economic growth and worldwide inflation, together with demographic ageing in some countries, have increased the perceived financial burden, both currently and future, arising from these programmes. Concerns have also been raised on a) the impact of social security programmes on savings and labor force participation, b) problems in developing countries with regard to large groups in the labor force who are still not covered and, hence denied benefits; and c) the possibility of intergenerational

conflicts arising out of the financial and equity debates in various countries (Western countries).

The elderly, like all other members of the population are entitled to leading secure lives with adequate economic means that can facilitate their access to good shelter, health, recreation facilities and so forth. Hence, legislation and social security schemes are usually passed or organized in the now developed nations to ensure that the elderly are assured of security in old age.

One of the ways of ensuring security in old age is for governments to make adequate provision in their budgets (especially recurrent budgets) for the availability of services to old people in a variety of forms, such as subsidized housing, access to recreation activities, access to education and access to free and subsidized health care. As the African States struggle to bring basic needs to the majority of their populations, especially the young, it is unlikely that adequate attention is paid to the needs of the elderly, thus countries accord low priority in their national development policies and programmes to the ageing populations.

For the privileged proportion of the population that is lucky to work in the formal sector, arrangement for social security funds is always made. Both the employee and employer undertake to contribute a fixed amount of money to funds that are reserved for use in old age when the employees formally retire. In the African circumstances where the proportion of the population employed in the formal sector is very small, the elderly who benefit from this type of social security scheme are very few.

According to one of the scarce assessment of the social security systems in Sub-Saharan Africa (SSA) countries, for the period 1960-1972; only seven countries had a social security system covering the elderly. These were Republic of South Africa, Burundi, Guinea Equatorial, Guinea, Mauritius, Rwanda and Dem. Rep. of Congo. Twelve years later, 19 additional countries (Cameroon, Central Africa Rep., Congo, Cote d'Ivoire, Benin, Ghana, Burkina Faso, Kenya, Lesotho, Liberia, Madagascar, Mali, Mauritania, Niger, Uganda, Tanzania, Togo and Zambia) introduced social insurance for retired persons (P.Mouton, 1975; J. Midgley, 1984). These figures may have probably evolved by now. But our concern should be the real purchasing power of allowances allocated and what proportion of those aged 60 years old and above benefit from these allowances.

Poverty in old age often reflects poorer economic status earlier in life; in LDC, many older people lack independent economic security and retirement income. This is more crucial for women who are seen as dependents of their husbands. The security system is even seen as an insecurity social security as the level of benefits available are often low and economic changes (especially due to SAPs and crisis) reduce the purchasing power of retired persons. Yet, the prospect of wider systems developing in the future is extremely limited.

It is suggested that there are other social security schemes where the government can undertake to support the elderly by using a means test for providing direct support for



different needs such as monthly living allowance, free accommodation, free medical treatment and recreation facilities for the elderly. For a government to be able to do this, it would require a strong well-developed economic base from which it can draw resources for social security for an increasing number of elderly people without jeopardizing the social and economic interests of the rest of the population.

In view of the substantial differences in economic and political conditions, social measures and policies to be set up are usually not feasible. In fact, the social and economic costs are too high to make effective public intergenerational transfers.

Beside demographic variables like life expectancy and age structure, socio-economic variables would significantly determine the occurrence of a sustainable Social security scheme. These are activity rate, unemployment rate, age of retirement, contribution rate, level of allowances and the global macro-economic indicators. In more LDCs, the only choice governments have in the near future is to minimize their role in this area, leaving most of the responsibility to the family and the market. Many SSA countries developing poverty alleviation strategies, are addressing poverty in a comprehensive manner without specific, target actions toward the elderly people.

*Is there a ‘crisis’ that demands immediate and extraordinary change? Some of the important concerns arising out of the contemporary developments are as follows:*

- Robust and consistent economic growth- a precondition for improving people’s living standards and providing them with adequate social protection- is lacking in many countries

Clearly, one of the best ways to combat poverty in old age is to pursue a successful development programme that raises the general level of national income without creating inappropriate inequalities in the distribution of income and wealth.

Since social protection, especially of the weakest, helps to define a society, its absence signifies social failure. A low level of social protection does often coincide with low levels of income and productivity. It is very clear that a very large proportion of the population in most regions of the world does not enjoy any social protection or is covered only very partially. This is a result, in part, of the substantial numbers working in informal activities where protection is a workplace benefit not a citizenship right.

- Industrialization and modernization have produced changes and challenges with regard to where and how people live, creating many risks and problems that the elderly and families have to face over their lifetime
- Limitations in the way the needs and problems of the elderly were handled in the past necessitate a reassessment and search for alternatives and supplements

Once individuals enter the economically active age groups, they become entitled to economically fulfilling lives. It is, however, unfortunate that in most of the developing economies, the formal sector can accommodate only a small proportion of the population.

This proportion is even shrinking in certain situations due to a number of factors including stagnant or negative economic growth and Structural Adjustment Programmes (SAPs). It is observed that in many instances workers are laid off and/or forced to retire at an early age. This would mean that even for those lucky to be employed in the formal sector (a large proportion of whom is usually men), life after retirement is unnecessarily long. Yet the retirement benefits provided are so meager that they do not provide adequate welfare for the elderly population.

### ***Sub-Saharan Africa and social responses to the elderly***

In the absence of public-funded social security schemes, ageing in developing countries must rely on the family, which becomes the main source of security and shelter. However, the urbanization process has contributed to deteriorating living conditions of old persons as the family breaks up due to migration and different socio-economic conditions accompanying urbanization. Lack of income-security in old age has an impact on adequate basic resources such as food and nutrition and adequate living environments (water, sanitation and shelter), conditions which impact on the health of elderly people.

The majority of the population is usually self-employed in agriculture and the informal sector. In these sectors, it is observed that elderly women and men continue to work until advanced age especially on household farms. For the elderly women, activities range from the purely economic ones (such as growing food and sometimes cash crops on the household farm) to caring for elderly husbands and grandchildren. This is often done in conditions of poverty and limited opportunities to participate in income generating activities.

In Africa, children and grandchildren are often the main sources of support for people when they are no longer able to work. Thus, the economic situation of many older people is intimately tied to the more general situation of the extended family as a whole. Surveys show that aged persons leave with family members (direct or extend).

Moreover, because of the changing composition of the family and unfavorable social and economic conditions, it is becoming usual to find that there are many emerging factors leading to an increasing number of risk groups among the elderly, such as single women and men, widows and childless women. Recently, the emergency of the AIDS pandemic has led to the following factors as reflected by the Technical Meeting on Population Ageing, Brussels, 6-9 October 1998 (UNFPA, 1999):

- ≡ AIDS mostly affects people in their most productive years, often depriving elderly people of their means of support.
- ≡ Orphans and widows of those who die of AIDS depend on the elderly for support (increasing the burden on the elderly).

In addition, elderly women usually give care to their elderly husbands (largely because of the big spousal age gap at marriage), to children of unmarried sons and daughters (often

without sufficient means). The greatest threat to the security and well being of older women remains the poverty of their society. Poverty affects both men and women, but for many women their vulnerability in old age is made worse because of the added disadvantage of “gender discrimination”.

*In many parts of the World, poverty in old age is the last phase in a lifetime of deprivation.*

- The changing population structure, from one with small proportion of older people to one with a much higher proportion, calls for greater attention and more resources for the elderly, raising important issues of financing and equity
- Despite a variety of programmatic efforts and significant increases in GDP, large numbers of older people continue to live in poverty, with the most serious problems afflicting older women.

Among other causes of poverty, especially relevant when people get older, are:

- Declining ability to work: when people grow old, two very important changes occur: their access to work, and hence remuneration, becomes less secure, and societal expectations regarding their work decrease. There is a direct link between poverty and declining work opportunities for the aged. Rural component and the drastically changes occurred over the last decades sweeping away many conditions that gave security and stability to the lives of older people in rural areas.
- Death of family members or their geographical separation: The many supportive roles that the family solidarity plays in promoting the economic security and social viability of both individuals and the larger society have been discussed at length in a large body of literature. Four major events can significantly weaken or eliminate the support traditionally available in old age:
  - a) The aged without spouse: as many studies around the world have shown, not only significantly weakens the support network that operates in times of need, it is also a direct cause of immediate problems for the surviving spouse;
  - b) Childless: people generally count on assistance from their children in times of need. But the fact remains that many are childless when they reach old age: i) biological infertility; ii) children may die; iii) not married at all, iv) one spouse died before any children are born. The little data indicate that older people without children are a minority but numerous in both developed and developing countries. Even though they typically constitute a relatively small part of the total population, their existence and vulnerability represent an important policy issue for every country
  - c) Migration of family members: while many younger migrants send remittances back to their parents, some choose not to do so or, more commonly, are unable to do so, given their own precarious financial

situation. Case also of disaster situation where most of the old people are incapable of walking.

Therefore, as the proportions and numbers of the elderly increase in Africa, they will bring to the fore many security, health, social and economic consequences ranging from high demands on welfare and social needs, to changes in the family structure. These changes are likely to lead to more underprivileged groups in the population if appropriate policies and related planning are not adequately addressed right from now.

### ***In Conclusion***

Africa is the continent with the youngest population in the world. This does not, however, mean that its population is not on transition to the ageing process. In fact, with declining fertility and mortality, it is estimated that Africa will be one of the continents with the fastest growing elderly population in the world during the period 1998 to 2050. It is important to recognize that the ageing of population is inevitable. And, available evidence indicates that life expectancies at advanced ages in developing countries are quite similar to those observed in developed countries.

With regard to the socio-economic problems related to the ageing process, the following question seems relevant: is ageing in developing countries a one more population problem? In fact, the reason for lack of concern in LDCs is that many of these countries have other urgent and pressing demographic problems such as:

1. Rapid population growth,
2. High infant and child mortality,
3. Excessive urban expansion,
4. Maternal mortality and so forth.

However, in light of the developed countries' experience in institutional arrangements for coping with old age needs, it is important to explore the context or conditions enabling their replication, on a sustainable base in African countries. Institutionalization of pension funds (schemes) has both economic and socio-demographic, micro and macro impact, especially when a large proportion of the population is concerned, as it is the case for an ageing population. On the economic side, pension funds have a direct impact on the global demand of the country, as the elderly population for consumption purposes spends pension allowances on the national market. On the social side, old age autonomy diminishes the burden of old age dependency. This suggests that if we borrow a leaf from the developed world, the time to start putting relevant policies and making appropriate plans to develop institutions that can cater for the welfare of the elderly is now.

Africa does not need to reinvent the wheel because we have a great deal to learn from the developed world. In fact, during the 1987 United Nations International Symposium on Population Structures and Development, the international community made a number of

useful recommendations on the social and economic implications of population ageing (United Nations, 1988).

The recommendations given by the international community in 1987, were almost re-echoed in later United Nations conferences on ageing: for example, the 1988 United Nations Conference on Ageing populations in the context of urbanization re-echoed almost similar recommendations but with an inbuilt bias towards urbanization (United Nations, 1991: 39-47); and the 1990 United Nations International Conference on Ageing Populations in the context of the family re-echoed almost similar recommendations with special reference to the family (United Nations, 1994: 21-23).

In a summary on the 1982 United Nations World Assembly on Ageing given by UNFPA (1998: 56), the international community adopted the Vienna International Plan of Action on Ageing in which a number of recommendations were made embracing health and nutrition, social participation, economic security, housing, the environment, consumer protection and education (see Annex 3 for this summary). In the same summary an outline of a set of principles regarding the elderly agreed on by the 1991 UN General Assembly is provided. A number of activities on ageing targeted by the international community in 1999 are also provided in this summary. (2002 Conference on Ageing).

Though increasing life expectancy is hailed by some as one of the greatest achievements of the 20<sup>th</sup> century, a more common reaction is a doom-laden prediction of health and social budgets being drained by caring for dependant old people. This negative tenor has been fuelled partly by a misunderstanding about health in old age. Certainly older people in general have poorer health than young people, and this is due partly to the higher rates of disease in old age.

### ***Response to longevity***

Among strategies and measures to be considered while facing the population ageing are:

- Empowerment of those who manage age structure changes, through networking, research and policy development and intersectoral partnership.
- Creation and strengthening of a reliable database is prerequisite for the development of national policies on healthy ageing.
- Awareness creation among policy- and decision-makers about the speed of population ageing and its public health consequences. This awareness is still low particularly in developing countries.
- Investing in health and promoting it throughout the life span is the only way to ensure that more people will reach old age in good health and capable of contributing to society intellectually, spiritually and physically. Although living longer remain both an achievement and a perpetual challenge.

Therefore, from available literature and past fora it is clear that the way forward for Africa is to take action as follows:

**A. *Data Collection, Analysis and Research***

- Data on the present situation and future trends of old persons should be collected/generated.
- Data on the major problems of the elderly: old-age income sources and health problems in particular should be collected.
- Reliable data on the family and the household, kinship structures and social security systems should be collected to provide a good foundation for policy making and planning.

**B. *Research and Analysis***

- Useful research for policy making and planning should be interdisciplinary, facilitate international comparisons and provide detailed comparison of various functional age groups both internally and internationally.
- Research on ways in which populations change in response to declines in fertility, increases in life expectancy and rural-urban migration should be intensified.
- Efforts to analyze and project the economic and social consequences of changing age structures should be strengthened.
- Efforts to design efficient and effective systems to deal with the concerns of the elderly should be reinforced by intensified studies on the possibilities of self-support, family support and public support.
- Training of adequate personnel in research and analysis on ageing should be emphasized.
- Training of adequate personnel in both planning and delivering of new services (social and health) for the elderly population should be advocated.

**C. *Policy Making and Planning***

- Policies to deal with the consequences of increasing proportions of the elderly should be formulated.
- Public spending and tax policies should take into account the needs and resources of the elderly.
- Consideration should be given to utilizing the productive potential of older persons in economic activities.
- Public and private sectors and NGOs should plan for meeting the needs of a rapidly increasing number of elderly persons, making the family the principal institution for ensuring the well being of all age groups (including the elderly).
- Policies to create awareness of the importance of new needs in data collection, research and training should be explored.
- Use of religious and political channels to sustain societal norms and preservation of family care for the elderly as main value (e.g. IEC campaign) should be promoted.

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