



Paper 3

**DEMOGRAPHIC AND ECONOMIC CONSEQUENCES OF
AGING IN BANGLADESH**

Professor M. Kabir

Price Tk. 50.00

Centre for Policy Dialogue

6/A Eskaton Garden, Ramna, GPO Box 2129, Dhaka-1000, Bangladesh
Tel: 8317055, 8318790; Fax: 8315701; E-mail: cpd@bdonline.com
December, 1999

CPD-UNFPA Publication Series

It is now widely recognised that there is a need to take the scope of the population policy in Bangladesh beyond the confines of achieving population stabilisation through reduction of fertility. Although in recent years the approach to reduction of fertility has changed from narrow family planning to a broad based reproductive health approach, it is being increasingly felt that Bangladesh's population policy should encompass other equally important issues which have wide implications for the development process and the quality of life of people of Bangladesh. To address some of the related pertinent issues the Centre for Policy Dialogue has initiated a programme which aims at undertaking a series of studies covering the broad area of **Population and Sustainable Development**. The major objective of these studies is to enhance national capacity to formulate and implement population and development policies and programmes in Bangladesh, and through close interaction with the various stakeholder groups, to promote advocacy on critical related issues. The programme which is scheduled to be implemented by the CPD between 1999 and 2002 shall address, *inter alia*, such issues as population dynamics and population momentum and their implications for education and health services, the nexus between population correlates, poverty and environment, impacts of urbanisation and slummisation and migration, as well as human rights. The study has benefited from generous support provided by the United Nations Population Fund (UNFPA). The programme also envisages organisation of workshops and dialogues at divisional and national levels and also holding of international thematic conferences.

As part of the above mentioned CPD-UNFPA collaborative programme the CPD has planned to bring out a series of publications in order to facilitate wider dissemination of the findings of the various studies to be prepared under the aforementioned CPD-UNFPA programme. The present paper on the theme of ***Demographic and Economic Consequences of Aging in Bangladesh*** has been prepared by Professor M. Kabir of the Department of Statistics, Jahangirnagar University. The paper was presented at the seminar on *Aging in Bangladesh: Issues and Challenges* which was jointly organised by the Centre for Policy Dialogue and Department of Statistics, University of Rajshahi on December 22, 1999. The seminar was held at Rajshahi under the CPD-UNFPA programme on *Population and Sustainable Development*.

Assistant Editor: Ms Ayesha Banu, Coordinator (Dialogue & Communication), CPD.

Series Editor: Professor Mustafizur Rahman, Research Director, CPD.

Demographic and Economic Consequences of Aging in Bangladesh

Introduction

With the success of the demographic transition and the consequent changes in population size and composition, the household and family structure have been undergoing considerable changes in most Asian societies. As a result, the emphasis of population problems is shifting from high fertility and mortality to the aging of populations, declining labor forces, social security and other related issues. Population aging means an increase in the elderly share of the total population. Rapid urbanization and increasing education also provided expanding opportunities for women to be engaged in wage employment outside home. The availability of informal care has been declining as a result of geographical mobility, the employment of women, singlehood, divorce, decreasing fertility, and the rising complexity and changing nature of family relationships. Consequently, women tended to be less available for the young and old in the household. In fact, developments of the formal sector will likely to reduce opportunities for the elderly to engage in productive work, while resources tended to shift from the hands of the parents to the younger generation. Developing countries with aging populations will face challenges providing support and medical care for the elderly. Due to fall in fertility the percentage of young dependents will decline, but the proportion of older dependents will increase.

The main purpose of this article is to investigate the demographic socio- economic issues that need to be addressed for the care of elderly. In the light of existing experiences, policy implications and research priorities will be identified and discussed. It has been stressed that elderly should not be viewed as a liability but as a productive and valued asset (ESCAP, 1996; Hermalin, 1995). Many researchers also highlighted the important role the elderly can play at local and community levels, as well as in their own families (ESCAP, 1996; Mason, 1991; Kabir and Salam, 1993). The Programme of Action of the International Conference on Population and Development held in Cairo in 1994 addressed a number of issues concerning population aging and older persons (UN, 1999). As regards older persons, the objectives set forth in the programme of action are (a) to enhance self-reliance and promote quality of life and productive and independent living; (b) to develop systems of health-care services and economic and social security schemes, recognizing the special needs of women; and (c) to

develop formal and informal social support systems to enhance the ability of families to take care of older persons within the family (UN, 1999).

Demographic Trends and Processes

The age structure of a population responds primarily to fertility levels and secondly, once low fertility levels are reached, to mortality. Table 1 presents trends in the proportion of aging in Bangladesh since beginning of this century. The trend is not consistent despite the fact there has been an upward trend in the proportion of aging. The census figure seems to be higher than other available estimates. This may be attributed to the age reporting of the population. The higher census estimate may be due to the fact that populations aged 59 are likely to be recorded as 60 years above. However, because of decline in fertility and increase in the life expectancy the percentage of population 60 years and above has been increasing. Given the dramatic demographic and socioeconomic changes that have occurred in some countries of Asia, it is appropriate to consider how much change has taken place in the factors associated with the well being of the elderly. In many agricultural societies of Asia, as elsewhere, parents would traditionally coreside with one or more married children and be supported by them in old age. Despite the importance of coresidence as an indicator of elderly individual's welfare in Asia, several cautions need to be observed in measuring and interpreting its prevalence (Hermalin, 1995). On the measurement side, some measures do not distinguish between coresidence with married and unmarried children. When an older parent lives with unmarried children, particularly those who are young adults, it may be unclear whether support is flowing primarily from the children to the parent or vice versa. If couples delay childbearing, or if husbands are significantly older than wives, then over time there can be an increase in the number of couples over age 60 who have unmarried children living at home, without signifying any change in the support arrangement of the parents.

Table 1. Trends in the Percentage of Population 60 years and above for various Censuses

Year	Percentage of population 60 years and above
1911	4.4
1921	4.0
1931	3.2

1941	3.7
1951	4.4
1961	5.2
1974	5.7
1981	5.6
1991	5.4

Aging issue in Bangladesh is not a main concern until recently because the demographic transition started only in recent years. However, in the coming decades, many Asian countries including Bangladesh will experience population aging, and the aging population will be large in absolute terms. For instance, in 1997 under the assumption that replacement fertility will be achieved in Bangladesh by 2005, the numbers of population aged 60 years above was 5.64 million (about 5 % of the total population) and this will increase to 14.6 million (about 9% of the total population) by the year 2025. On the other hand, if replacement fertility is achieved say 10 years later then the population aged 60 years above will be 6.7 million in 2002 and this number will be to 12.5 million (about 7.4 % of the total population) by the year 2025. This indicates that with the achievement of fertility decline Bangladesh will also experience rapid growth of elderly population (Table 2). In the next 25 years, the decline in the share of the young population and the increase in the share of the elderly population will continue. Consequently, the aging process will continue. Between 1997 and 2010, the share of the population under fifteen years is expected to decline by about 19 percent under the assumption of replacement level fertility; while the share of elderly population during the same period will increase by about 50 percent. Similarly, the share of the working –age population will increase by about 38 percent.

In Bangladesh about half of the population lives under poverty line or do not have adequate housing, and the majority of the elderly population will be found in rural areas where poverty is a serious problem. As evident from Table 2 Bangladesh is projected to have 9 percent of its population of age 60 years and above in the year 2025 if fertility target is achieved by 2005. The aging process is expected to accelerate in the next century, mainly because the large cohorts born in 1950s and 1960s respectively will be joining the ranks of 60 years and over during this period. The decline in mortality, particularly at young ages, also means that a higher proportion of the large cohorts will survive to old age.

The proportion of aged 60 or over appears to react to fertility decline less sensitively than the proportion under age 15. The proportion aged 60 or over is projected to increase only slightly, from about 5 percent in 1992 to 6 percent in 2010. The increase will become faster after 2010 and will reach 9 percent in 2025. United Nations also estimated 5% of the Bangladesh population is 60 years and above in 1999 (UN, 1999). The UN estimate is consistent with the present estimate. Population aging is the inevitable result of the demographic transition associated with declining birth and death rates. Life expectancy is increasing although at different rates. Age structures undergo transformation during the process of population aging. But even with declining fertility rates, the young age structure creates considerable momentum for future growth because the population reaching childbearing ages continues to expand. Women have fewer children than women did in the past, but to day there are more women having these children. Changes in the age structure also alter the dependency burden that is, the share of population that is likely to require financial support from the working age population. Ratio of those under age 15 or ages 65 and older measures age dependency to those ages 15-64. When fertility is high, the proportion of children in a population also tends to be high, and so are dependency ratios. But when fertility begins to fall, the dependency ratio also falls because the working-age population becomes a larger share of the total. The total dependency ratio combines the child and aged dependency ratios. It is important measure of the relationship between the size of the working –age population. The ratio highlights the burden on the working aged population for simultaneously supporting children and the elderly. As birth rates fall, child dependency ratios decline as evident from Table 2. Total dependency ratio will decrease between now and 2025 because the proportion of the population under age 15 will decrease to a greater extent than the proportion of older people will rise (Table 2)

Table 2. Distribution of Population (in million) by Selected Indicators of Aging under Alternative Demographic Scenarios.

Indicators	Selected Years							
	1992	1997	2002	2005	2010	2015	2020	2025
NRR=1, 2005								
<15	49.078	47.434	43.478	40.636	38.532	36.949	36.347	36.53
15-64	61.03	72.10	85.20	92.17	99.66	106.89	111.78	114.14
60+	5.033	5.639	6.711	7.378	8.375	10.049	12.167	14.562
65+	3.1891	3.521	3.974	4.295	5.100	5.845	7.033	8.530
70+	1.833	1.908	2.182	2.217	2.514	3.095	3.498	4.217
Total population (in million)	113.300	123.140	133.180	138.280	145.070	151.930	157.930	162.620
% 60 and above	4.4	4.6	5.0	5.3	5.8	6.6	7.7	9.0
% 65 and above	2.8	2.9	3.0	3.1	3.5	3.8	4.5	5.2

Young D.R	80.4	65.9	51.0	44.1	38.7	34.6	32.5	32.0
Old DR	8.2	7.8	7.9	8.0	8.4	9.4	10.9	12.8
Aging Index	10.3	11.8	15.4	18.2	21.7	27.2	33.5	39.9
% 70+/65+	57.5	54.2	54.9	51.6	49.3	53.0	49.7	49.4
NRR=1,2010	1992	1997	2002	2005	2010	2015	2020	2025
<15	49.078	47.434	44.043	42.557	42.56	40.719	38.518	36.891
15-64	61.03	72.10	85.20	92.17	99.66	107.02	113.52	117.96
60+	5.033	5.639	6.712	7.379	8.375	10.05	12.168	14.564
65+	3.181	3.521	3.974	4.295	5.101	5.845	7.034	8.529
70+	1.833	1.908	2.182	2.217	2.514	3.096	3.498	4.217
Total population (In million)	113.300	123.060	133.580	139.950	148.690	154.860	160.290	164.690
% 60 and above	4.4	4.6	5.0	5.3	5.6	6.5	7.6	8.8
% 65 and above	2.8	2.9	3.0	3.1	3.4	3.8	4.4	5.2
Young D.R	80.4	65.8	51.7	46.2	42.7	38.0	33.9	31.3
Old D.R	8.2	7.8	7.9	8.0	8.4	9.4	10.7	12.3
Aging Index	10.3	11.9	15.2	17.3	19.7	24.7	31.6	39.4
% 70+/65+	57.6	54.2	54.9	51.6	49.3	53.0	49.7	49.4
NRR=1,2015	1992	1997	2002	2005	2010	2015	2020	2025
<15	49.078	47.434	44.269	43.299	45.202	44.944	42.009	38.707
15-64	61.03	72.10	85.20	92.17	99.66	107.07	114.20	120.42
60+	5.033	5.638	6.712	7.378	8.374	10.05	12.169	12.487
65+	3.181	3.521	3.974	4.295	5.101	5.844	7.034	8.529
70+	1.833	1.908	2.182	2.217	2.514	3.097	3.499	4.218
Total population (In million)	113.300	123.060	133.580	140.120	150.600	158.560	163.890	168.300
% 60 and above	4.4	4.6	5.0	5.3	5.6	6.3	7.4	7.4
% 65 and above	2.8	2.9	3.0	3.1	3.4	3.7	4.3	5.1
Young D.R	80.4	65.8	52.0	47.0	45.3	42.0	36.8	32.1
Old D.R	8.2	7.8	7.9	8.0	8.4	9.4	10.6	10.4
Aging Index	10.3	11.9	15.1	17.0	18.5	22.3	28.9	32.3
% 70+/65+	57.6	54.2	54.9	51.6	49.3	53.0	49.7	49.5

During the process of population aging, aged dependency ratios will increase. The process of population aging involves an increase in the old-old (70 years and over) share of the elderly population. Since the consequences of aging are different for old-old and the young old (60-69) elderly, it becomes important to take account of the needs and concerns of both age groups in the formulation of policies and programs. Over the period of investigation it is evident from Table 2 that about 50 percent elderly will be over 70 years and above. With the achievement of fertility target young dependency ratio will decline and old dependency will increase (Table 2).

The number of elderly in Asia and the Pacific region is expected to rise dramatically. This is partly assumed continuation of mortality decline and partly because of the momentum effects of past fertility decline on the future age distribution. Table 3 shows the percentage of population in some selected Asian countries at two time points 1990 and 2025 respectively. In 1990, among the Asian countries the highest proportion of elderly was found in Sri Lanka

(8%) followed by India (7.1 %) Thailand and Indonesia (6.3 %) respectively. The projected figure suggests the situation will be different by 2025 because of rapid fertility decline in some countries. For example, in Thailand and Srilanka about 17% of its total population will be 60 years and above. Indonesia, Malaysia and India will have similar pattern of elderly population between 13 to 14 % of its total population will be 60 years and above.

Table 3. Percentage of Population 60 Years and Above in Some Selected Asian Countries at Two Time Points 1990 and 2025

Country	1990	2025(projected)
Indonesia	6.3	13.6
Malaysia	5.8	12.6
Philippines	4.9	10.9
Thailand	6.3	16.8
Bangladesh	4.9	9.0
India	7.1	12.7
Pakistan	4.6	7.0
Srilanka	8.0	16.9

The most dramatic decline in fertility has occurred in Bangladesh where in a span of 20 years the total fertility rate fell from an average of 6.3 children per woman to just 3.3. Improvements in life expectancy are not so dramatic as in the case of fertility. It has increased on an average 0.5 years per year over the last two decades. These changes are the main forces driving the increased proportions of the elderly. Increasing numbers of elderly population and the erosion of family support systems will call for new arrangements for the care of elderly population. Despite change in the family structure from joint family system to nuclear family system an overwhelming majority of elderly men and women in Bangladesh continue to live with their children. Elderly couples, however, are increasingly living alone. This is due partially to changing social norms - delayed marriage, new gender roles – and also to higher rates marital dissolution and growing numbers elderly whose spouse has died. As a consequence many elderly women also live alone, and their numbers are also rising. However, researches show that attitudes towards the duty and custom of children caring for elderly parents are

changing, and there is a rise in independent living, either as couples or alone, among elderly men and women. Population aging policies should respond to the needs and concerns of women who form an increasing majority of the elderly (aged 65 and over).

As life expectancy increases for women and men, there is a longer period following retirement. Women not only live longer than men, they also more likely to be widowed because of customary age differences between husbands and wives. Children support and care for elderly parents during longer periods, and the period during which people live as three –generational families increases dramatically. Evidence indicates that family members are still important in providing emotional support and care to elderly persons living alone or away from family members (UNO, 1999; Mason, 1991). Under the nuclear type family structure, which is becoming more common, elderly persons seem to have little or no role or authority over the children’s “new families”. This is particularly so if age has forced the elderly person to pass on the authority, such as in the running of the family business, to the younger generation. In such a situation, their care and support during old age is not automatically provided for. It may also result in increasing isolation of the elderly from social activities (Conception, 1987), particularly if the elderly person lives alone.

Social and Economic Implications of Aging

Social and economic changes as well as demographic changes are occurring in many developing countries. In Bangladesh, population aging is potentially a more serious matter owing to the limited resources available to support the elderly. The process of development tends to bring rapid change in social behavior and institutions, which may have adverse implications for the care and well being of elderly persons. Therefore, the situation of the elderly population should be examined, taking account of the social and economic context in which population aging is taking place. In the traditional family system, elderly persons are the main decision-makers, and support and care for old age are automatically provided. Changes in the family structures, however, may not automatically provide for such old age support, and elderly persons may not assume such an important position. The process of population aging may impel considerable increases in expenditures for social security as a share of national income. Among the working-age population aged (15-64), the middle-age population (aged 40-54) forms the core of the total labour force. With population aging (aged 65 and over), the people in this middle core increasingly shoulder a double burden of simultaneously supporting their children and their elderly parents. The burden will increase into the next millennium. Economic support may come from the family or social security

schemes (pension or insurance schemes or provident funds), that are likely to cover only a very small proportion of the elderly population in a country like Bangladesh and mainly those in the formal sector. Thus, in Bangladesh a large majority of the aged are not protected by old age security or pensions, and that many continue to work well beyond age 60 (ESCAP, 1996). Provident funds are normally paid out in a lump sum upon retirement and are usually inadequate and quickly spent. In the poorer segments of the population, where family members usually pool resources for fulfilling their basic needs of food, shelter and security, the economic and political pressures are contributing to the insecurities to life and socio-psychological state of the elderly. With the inflationary effects reducing the buying power of money, those with little saving and meager earnings, have in many instances to sell their property to meet with their day to day expenses. The pensions are often not adjusted correspondingly to cover for the inflationary effects of the currency. Most elderly persons therefore have to work to advanced ages and depend almost entirely upon family support during their later years. It is obvious that the income of older people can affect their health, and that labor force activity will have an impact on income.

The care and the support provided to elderly parents are usually in the form of shared housing, food and other necessities, and less often in the form of direct transfers of income. Such transfers or remittances are, however, more likely from those children who live apart or who have migrated. An important point to note is that living arrangements are not indicative of the care and support that is received by parents. For example, living in an extended family system with one's children is no guarantee that adequate care and economic support are being provided, and living independently does not mean that one's care needs are being met by family members. Urbanization and population growth has also reduced the proportion of families that have control of productive resources. With the shift from an informal to a formal economy, the elderly are likely to face even fewer opportunities for productive work. The risk- insurance motive to high fertility depends critically on strong filial bonds and institutions that encourage sons to support their parents in old age (Amin et al, 1994). In rural Bangladesh, a father usually retains ownership of land until death, even when sons from separate households that function as separate economic units. Thus, sons are encouraged to fulfill their filial responsibilities through their economic dependence on the father, and intergenerational transfer of property plays an important role. The risk –insurance motive may be eroding, however. Hence, resources tend to shift from the hands of parent's to the

younger generation, partly also as a result of increasing educational achievement, which again may result in parent's having less say in family decisions and their care and support being less consistent or uncertain later in life. Certain elderly persons may prefer to live separately in their own dwellings and familiar surroundings. However, families can still live fairly close by in separate living quarters and provide help and assistance to one another. The likelihood of this happening will diminish with rising costs of living, increasing development and urbanization. Physical separation may also reduce financial support in terms of remittances, partly because of the high cost of urban living or the loss of emotional ties between parents and children as the period of absence lengthens. The other factors include occupational and geographical mobility, urbanization, and the increased proportion of women working outside the home. Although increasing number of younger members of the family are leaving the home of their parents, their economic responsibility towards the elderly does not diminish. They continue to send support, but may find it difficult to live with elderly members in joint households. The desire of younger people to be independent and to have greater personal freedom does not necessarily imply a growing disregard for the elderly. At the same time, such changes may make it more and more difficult to care for the elderly. In countries like Bangladesh the care of elderly by children is an important cultural norm. Such norms are typically maintained by strong sanctions against those who deviate from them, and by offering rewards for those who adhere to them.

Increasing rural/urban migration has also resulted in the development of squatter and shantytowns next to conglomerates in many big cities of Asia. Shantytowns develop mainly because of the inability of families live in urban centres. The economic condition of families living in such environments usually can not provide adequately for the care and support of the young and elderly population. The elderly in such situations have to be totally responsible for themselves and depend on external support.

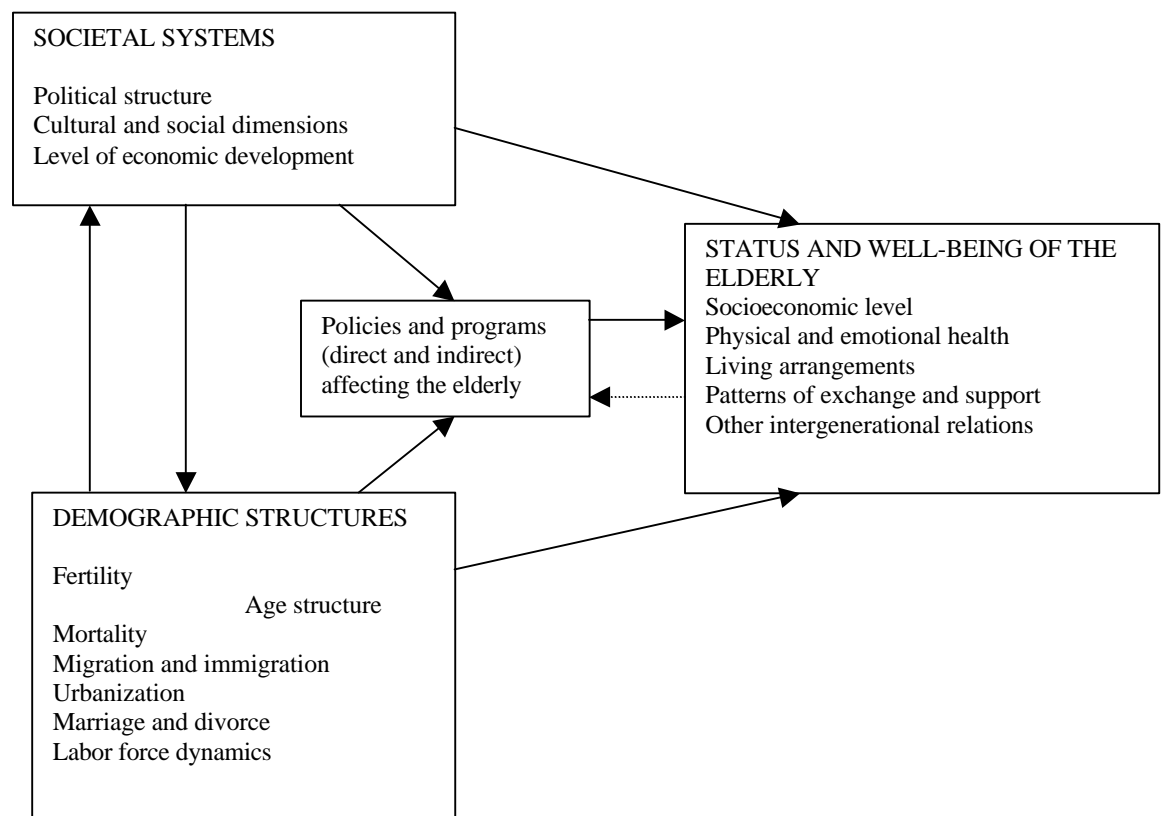
A Conceptual Framework

On the basis above observations, this paper develops a framework for understanding the factors that affect the aging process and its demographic and socio-economic consequences. The conceptual framework describes the interrelationships of the major factors involved. Figure 1 gives the well being of the elderly as a function of, first, the political, socio-cultural and economic systems of a society; second, the society's demographic structures; and the

third, the resultant policies and programs. This conceptual framework views these policies and programs as shaped not only by the needs of the elderly but also by the economic and political power that the older segment of the population can exert in its own behalf. The conceptual framework does reflect dynamic aspect of the situation. It is important to remember that the broad, cultural, socio-economic, and demographic dimensions are all shifting over time, presenting opportunities and constraints that affect the development of programs and impinge directly on the welfare of the elderly. Given the dramatic demographic and socio-economic changes that have occurred in Asia, it is appropriate to consider how much change has taken place in the factors associated with well being of the elderly. In many agricultural societies of Asia, parents would traditionally coreside with one or more married children and supported by them in old age. Despite the importance of coresidence there should be caution when an older parent lives with unmarried children, particularly those who are young adults, it may be unclear whether support is flowing primarily from children to parent or vice versa. In an urban setting, for example, elderly parents may be heavily engaged in child care, shopping, and meal preparation for the busy younger couple rather than being on receiving end of various forms of social support (Hermalin, 1995). Asian study shows that elderly persons who do not live with children are not necessarily living alone, since many are living as couples. The proportions of the elderly living alone in Asian countries are low, rarely reaching 10 percent and often below 5 percent in the countries studied (Knodel and Debavalya, 1992; Martin and Kinsella, 1994). The conceptual framework shows that a sounder approach is to view the demographic trends as providing a set of challenges and opportunities within which to develop social policies and programs commensurate with societal changes. For instance, even though an older population eventually has a high ratio of elderly dependents to working- age people, with a potential loss of productivity and higher social welfare costs many possible points of intervention can mitigate those costs. These include adjustments in the age of retirement, training and effective employment of older workers, increased labor force opportunities for women, better education and training of young people, and appropriate policies for regulating migration to big cities. Demography offers useful perspectives and techniques for improving our understanding of these opportunities and challenges, and monitoring the well being of the elderly. Although it shares many procedures of scientific inquiry with other social sciences, its insight into population dynamics and its emphasis on research strategies provide valuable

leverage for research on aging (Hermalin, 1995). A major accomplishment of demography is the ability to trace the effect of population processes –

Figure 1: Conceptual framework for factors affecting the status and well being of the Elderly



of fertility, mortality and migration – on the age structure of population. The levels and trends of these vital processes and their interconnections with other demographic factors have several implications for population aging. Although future fertility levels will largely determine the proportion of elderly people within each country, the number of elderly is essentially a function of past births and mortality levels. Because of the past large birth cohorts, most Asian countries must anticipate a sharp increase in the number of elderly irrespective of the precise future age distributions. For countries with low fertility, the future

path of mortality will be important in determining the proportion elderly and the age distribution within the older ages – that is, the relative numbers of so –called younger –old versus the oldest-old. As these groups can differ sharply in their labor force participation rates, health care utilization, and needs for family and other supports, it is important for policy makers to have accurate estimates of the numbers within each group. The recent reductions in mortality and other older ages have led some analysts to make optimistic forecasts about future extensions of life expectancy (Hermalin, 1995). More study of mortality trends at the older ages in Asia appears warranted, along with closer attention to the implications of various alternative demographic scenarios. The other factors that determine demographic structure – migration, urbanization, marriage and divorce, and labor force dynamics – can also impact the well being of the elderly and impinge on policy.

One manifestation of an older age structure is thought to be a higher dependency ratio, generally measured as the ratio of the population under age 15 or over age 65 to that aged 15-64. Some regard it as reflecting the increased “burden” on the productive portion of the population. But since the dependency ratio is made up of both older and younger dependency groups, one to one correspondences does not exist between an increase in the proportion elderly and a rise in the dependency ratio. Mortality and morbidity patterns among the elderly are changing. With recent reduction in infectious diseases, geriatric diseases such as cancer and heart diseases have become the main cause of death. Increasing life expectancy and longer periods of widowhood render women more vulnerable than men. Policies thus should address the special needs and concerns of women for social protection against economic and physical uncertainties. The family remains central to support for the elderly in rural Bangladesh. There is increasing recognition of the need to complement this support with a wide variety of home care and community-based services. There is also a need to supplement such support with institutional offering care for those with special needs, especially the old-old elderly. Given this likelihood, what research community and the elderly organizations can do of its understanding. How population dynamics are interacting with culture, social change, and economic conditions to affect the well being of the elderly and the relationships between older and younger generations need to be answered in the socio-economic and cultural context of a country.

Policy Implications

The main factors that are contributing to induce the aging process in Bangladesh are the demographic factors: downward trend of fertility and mortality rates. Besides, demographic factors, economic factor, rapid urbanization, and the improvement of health care facilities to some extent are also influencing directly or indirectly to the process of aging in Bangladesh. The proportion of elderly persons is still quite low in Bangladesh compared to many South Asian countries (Table 3). However, the absolute figure is large because of large base population of Bangladesh. Coupled with the aging process, old age dependency ratio will increase appreciably by 2025 if fertility declines continue as per target. The most important point is that among the elderly population about 50 percent will be 70 years above. The time dimension is important in recognizing that future cohorts of the elderly who are likely to be different in their characteristics compared with current cohorts because of the demographic and socio-economic changes that have taken place. On average, they will be better educated, more urban, with smaller families, and probably with better health than the older cohorts will. These differences must be taken in consideration for in fashioning programs that will extend into the future. Future needs and demands from the elderly for recreation, medical facilities, transportation and housing may look quite different than they do currently (Hermalin, 1997). The changes in social structure including the transition leading to from extended to nuclear and smaller families, coming with urbanization and modernization, are becoming more and more widespread (ESCAP, 1996). Given the unemployment situation in Bangladesh, extending age of retirement and generation of employment opportunities for elderly will not be feasible. The need for local level institutions that sensitive to local conditions, and at the same time is not regimented, and promotes greater community involvement and participation will be important.

Coresidence with children may promote physical and emotional health, but poor health may be a cause of coresidence (Hermalin, 1997). To develop sound policy, it is important to understand these and other subtle relationships. Bangladesh should recognize the dangers of not planning for or considering the impending population aging issues and problems, especially as the cohorts are already born and their numbers and characteristics are known. It is to be noted that population aging is inevitable with rising life expectancies. To have effective policy on elderly issues arising from population aging should be anticipated in time. Developing countries like Bangladesh should incorporate an aging component into long-term planning which allow the timely development of appropriate social responses to the changing

needs of the elderly. Research efforts and policy analysis should be undertaken on the physical and human resources needed to accommodate the growing number of elderly people and on the appropriate combination of social and family support. Recognizing that in Bangladesh's provident fund, pension and social security programs for the elderly are inadequate, have low coverage or do not exist at all, it is recommended that high priority be given to establishing a "safety net" for the elderly. Long-term planning to anticipate the changing needs over time of the young, elderly and working-age populations should be encouraged so as to ensure that adequate resources are available when and where they are needed.

Possible shifts in levels and patterns of coresidence are one manifestation of the accommodations within existing institutions that are likely to occur with on-going demographic and socio-economic changes. To develop sound policies and programs, it is important to track the adjustments in behavior and social relationships that families and individuals make in the face of rapid social changes (Hermalin, 1997). The improving status of women through increased literacy and education, economic self-sufficiency and control over fertility also means that, increasingly new institutional arrangements, such as household help and child-care centres will perform household tasks and provide the care and support of children. In turn, men and women will have to take cognizance of the fact that they themselves may not receive much family care and support when they grow old, some children may grow up having little emotional support from an attachment to the parents concerned. It is clear that, with changing family structures, the elderly do not automatically have a role to play within the family and in the society, and their support are not automatically provided for. Therefore, policies and programs must set up a support system which will enable the elderly to continue to participate actively in society and the family, and will enable families to continue being the main care providers for old age. With the present economic structure, Bangladesh can not afford the economic burden of setting up an institutional framework to cater to a larger number of elderly persons. Secondly, and more importantly, there can be no substitute to what a family can provide for an elderly person. Familiarity of surroundings, love and emotional ties, a sense of belonging and of feeling wanted, to name only a few, are very important for emotional security, especially during when one becomes increasingly dependent on or losses a loved one. In addition, families facing economic constraints such as those living in slums and squatter areas as a result of

rural to urban migration, and those families living under the poverty line, including quite a number of women headed, are unlikely to be able to provide adequate economic support and care for the elderly. As a result of urbanization, migration, modernizing influences and declining family size, there is a clear need for such support services to ensure that the elderly continue to play an active role and are provided and cared for in old age. Elderly persons could also be utilized and organized as a pool of valuable resources, with vast experience and expertise, to influence policies and participate in decision making. In this way, also, they themselves can command economic resources and have access to opportunities. By adopting innovative employment opportunities which reflect the changing strengths and needs of elderly workers, they can play a catalytic role in economic and social development, which would enhance a positive perceptions of society towards the elderly. Flexible retirement's age to allow the elderly to work for, as long they are able and want to. Community support services and residential services by the Government, either through non-government organizations or local voluntary groups can facilitate the aged. The Government may make some initial financial contribution and subsidize the disadvantaged groups, but such community and residential services can be self-financing.

It emerges from the foregoing discussions that the long-term economic planning should recognize the developmental perspective of population aging on society. Adjustments will probably have to be made in national expenditures and allocations, investment and consumption patterns, labor and employment. It is necessary to take cognizance of the changes in the characteristics and expectations of the elderly in the future and the different needs of subgroups of the population, and to facilitate external support for the family. Policies and programs should encompass the young as well, and emphasize healthy life styles and appropriate financial security for old age.

Research Priority

The researches so far carried emphasized the importance of understanding the interactions among changes in family patterns, culture and traditions and of the support for and contribution of the elderly Population (ESCAP,1996). Many of the intriguing questions associated with older population structures involves dynamic relationships between aging and other social, cultural and economic developments. There has been little research works on the socio-economic and physical well being of the elderly and factors affecting their status in Bangladesh context. Major research questions include the demographic, social, and economic

characteristics of the elderly population and implications of the study findings for public policy. Given this broad objective the major research issue is to investigate the effects of social change and the policy relevance of those effects. Surveys of elderly must move beyond the narrow confines of the household. Information should be obtained about the characteristics and location of all the respondent's children and other close relatives, such as parents and other siblings. This mapping of kin availability provides a measure of respondent's potential support network and adds considerable insight beyond the simple fact of coresidence. A persistent theme of research may be the need to monitor the evolving interrelationships between cultural and socioeconomic shifts and the status of elderly. This involves identifying current family arrangements and social, health and economic characteristics to capture and shifts in attitudes, beliefs, and expectations that presage future norms and behaviors. For example, in some Asian societies influenced by tradition and culture, older parents coreside with sons rather than daughters; but with lower fertility, significant proportions of these populations will find it difficult or impossible to maintain a strong gender preference. Determining whether there are early signs of changes in this norm will be of interest - both for understanding the dynamics of social change and for drawing policy implications. Other normative attitudes include elderly people's expectations of support from children or coresidence with them, attitudes towards privacy and independence among close relatives, and the preferences for family versus government support. Some researches in Asia found that frictions between mother in laws and daughter in laws but focus-group research also indicates a growing mutual understanding of their different life-styles (Mehta, Lee and Osman, 1992). Although surveys can shed light on some of these aspects, especially when the issues become well articulated, research on aging is likely to benefit from a range of qualitative approaches, including focus groups, case studies, and ethnographic studies. Both quantitative and qualitative researches that traces changing norms and attitudes and emerging needs will be valuable for program implementation.

References:

Amin, Sajeda et al. (1994). Socio-Economic Change and the Demand for Children in Rural Bangladesh. Working Paper No 70. Population Council. New York.

Conception, Mercedes B. (1987). The Elderly in Asia. In Population Aging: Review ...pp. 21-32

Cain, Mead (1986). The Consequences of Reproductive Failure: Dependence, Mobility and Mortality among the Elderly of Rural South Asia. Population Studies, Vol 40, pp.375-388

Cain, Mead (1991). The Activities of the Elderly in Rural Bangladesh. Population Studies, vol. 40,pp.375-388.

Casterline, John B., and others (1991). Living Arrangements of the Elderly in Four Asian Countries. Paper presented at the Annual Meetings of the PAA Washington D.C. 21-23 March.

Hermalin, Albert I. (1995). Aging in Asia: Setting the Research Foundation. Asia-Pacific Population Research Reports. Number 4, 1995. East-West Center, Hawaii.

Economic and Social Commission for Asia and Pacific. (1996). Population Aging in Asia and the Pacific. Japanese Organization for International Cooperation in Family Planning, Inc. Tokyo and Economic Commission for Asia and Pacific.

Economic and Social Commission for Asia and the Pacific. (1996). Population Aging and Development. Report of the Regional Seminar on Population Aging and Development. 11-14 December 1995, Bangkok.

Hermalin, Albert I (1997). Drawing Policy Lessons for Asia from Research on Aging. Asia Pacific Population Journal. 12(4) PP 89-102. Economic and Social Commission for Asia and the Pacific (ESCAP), Bangkok, Thailand.

Khasiani, S.A. (1991). The Integration of Aging and Elderly Women into Development in Eastern Africa. Paper Presented at the Expert Group Meeting on Integration of Aging and Elderly Women into Development, Vienna, 7-11 October 1991.

Knodel, John, and Nibhon Debavalya. (1992). Social and Economic Support Systems for the Elderly in Asia: An Introduction. Asia –Pacific Population Journal 7(3): 5-12

United Nations Organizations. (1999). Population Aging 1999 Data Sheet. Population Division. Department of Economic and Social Affairs, New York.

Kuroda, Toshio (1989). Population Aging in the ESCAP Region: a review of the Current Situation, In Emerging Issues of Population Aging in Asia and the Pacific. Asian Population Studies Series No. 99. Bangkok: ESCAP, pp 47.

Kuroda, Toshio (1991). Structural Change of Age Composition in the Future and Its Socio-economic Implications: pp.89-91 in Population Aging: Review of Emerging Issues, ESCAP. Asian Population Studies Series No. 80, Bangkok.

Kabir, M. and M.A. Salam. (1993). Aging in Bangladesh: Its Social, Economic and Health Consequences. Published in a Book titled “ The Elderly Population in Developed and Developing World: Policies, Problems and Perspectives edited by P. Krishnan and K. Mahadevan. B.R. Publishing Corporation, Delhi, India.

Kendig, Hal L. (1987). Roles of the Aged, Families and Communities in the Context of an Aging Society: pp.75-83 in Population Aging: Review of Emerging Issues, ESCAP. Asian population Studies Series No. 80, Bangkok.

Lee, Ronald. (1992). Population Aging and Its Social and Economic Consequences. Berkeley: Institute of International Studies, University of California.

Lee, Ronald. (1994). The Formal Demography of Population Aging, Transfers, and the Economic Life Cycle. In Linda G. martin and Samuel H. Preston (eds.), Demography of Aging. Washington. D.C.: National Academy of Press.

Martin, Linda G. (1989b). Living Arrangements of the Elderly In Fiji, Korea, Malaysia, and the Philippines. Demography 26(4): 627-43.

Martin, Linda G., and Kevin Kinsella. (1994). Research on the Demography of Aging in Developing Countries. In Linda G. Martin and Samuel H. Preston (eds), Demography of Aging. Washington, D.C.: National Academy Press.

Mason Karen O. (1991). Family Change and Support of the Elderly in Asia: Pp 96-107 in Population Aging in Asia, ESCAP. Asian Population Studies Series No. 108, Bangkok.

Mehta, Kalyani, Alexander E.Y. Lee, and Mohd. Maliki Bin Osman.(1992). Living Arrangements in Singapore: Cultural Norms in Transition. Comparative Study of the Elderly in Asia Research Report 92-22. Ann Arbor: Population Studies Center, University of Michigan.

Ogawa, Naohiro, and Robert D. Retherford. (1993). Care of the Elderly in Japan: Changing Norms and Expectations. Journal of Marriage and the Family 55: 585-97.

United Nations. (1999). Population Growth and Demographic Structure. Proceedings of the United Nations Expert Group Meeting on Population Growth and Demographic Structure Paris 16-20 November 1992. Department of Economic and Social Affairs. Population Division. New York.

United Nations. (1992). Economic and Social Aspects Population Aging in Kerala, India. Department of Economic and Social Development. Population Division, New York.

United Nations.(1956). The Aging of Populations and Its Economic and Social Implications. Population Studies, No 98, New York