

**AGEING AND THE CHANGING ROLE OF THE FAMILY  
IN SRI LANKA**

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## ABSTRACT

The ageing of populations is an unavoidable and irreversible global phenomenon. Ageing in developed countries occurred gradually over a relatively long period of time, while ageing in developing countries including Sri Lanka has been more rapid. The rapid decline of fertility and mortality rates along with migration in Sri Lanka, have reshaped the age-sex structure of the population. Sri Lanka's rapidly ageing population has important social-economic implications and real challenges for government and older people themselves. The ageing process has an important relationship with the changing nature, structure and the function of the family which has been occurring simultaneously in Sri Lanka. The Sri Lankan elderly have traditionally been almost totally dependent on family support, and a key policy question is whether the transition from traditional to modern family will change intergenerational relationships.

The conceptual framework of the study, based largely on the work of Caldwell (1982) and Hugo (1997) focuses on changes in the intergenerational transfer of wealth and its implications for ageing populations. The study argues that the changes in the direction of wealth flows associated with changing role of the family, has influenced the well-being of the aged population. The study uses a mixed methodology based primarily on surveys of 300 elderly households and 150 control households and a wide range of quantitative and qualitative information.

This study examines the effects of the changing role of the family on the ageing population in Sri Lanka. Examination of the timing of the onset of ageing and its process, as well as the changing family role, enabled this study to differentiate the family roles of different generations according to their diverse behavioural patterns in dissimilar socio-economic and cultural environments in different time periods. The study shows that living arrangements of the elderly population are changing with an increasing number of one generation families. Co-residence with an adult child in their own home is the most common living arrangement but the study found that many children who co-reside with parents receive some benefits from the parents, despite the commonly held belief that it is the parents who benefit through gaining access to care.

The study examines intergenerational exchanges between elderly parents and adult children. Transfers between the generations are greatest where there is co-residence. It was found that while older Sri Lankans on average have lower levels of well-being than

the rest of the community it is higher among those who co-reside compared to those living in one generation families. Overall the changes in the family role and functioning have led to a reduction in the well-being of Sri Lankan older people. Moreover this gap has not been filled by pension and social protection schemes in Sri Lanka which remain limited. It is crucial that this area be addressed by policy makers and planners.



## **DECLARATION**

This work does not contain any material that has been accepted for the award of any other degree or diploma in any University or tertiary institution by Manori Kaluthantiri. Furthermore, to the best of my knowledge and belief, this work contains no material previously published or written by another person, except where due reference has been made in the text. After the copy of my thesis is deposited in the University library, I give consent for the material to be made available for loan and photocopying, subject to provisions of the Copyright Act 1968. Unless permission has been granted by the University to restrict access for a period of time, my consent is given for a digital version of my thesis to be made available on the web, via the University's digital research repository, the Library catalogue, the Australian Digital Thesis Program(ADTP) and web search engines.

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## ABBREVIATIONS

ADL	Activities for Daily Living
ADTP	Australian Digital Thesis Programme
ASI	Adelaide Scholarship International
BA	Bachelor of Arts
CBR	Crude Birth Rate
CBSL	Central Bank of Sri Lanka
CDR	Crude Death Rate
CENWOR	Centre for Womens' Research
CPD	Commission on Population and Development
CUTS	Consumer Unity and Trust Society
DC and S	Department of Census and Statistics
DHS	Demographic and Health Survey
DS	Divisional Secretariat
ESCAP	Economic and Social Commission for Asia and the Pacific
FGD	Focus Group Discussions
GDP	Gross Domestic Product
GN	Grama Niladhari
GOSL	Government of Sri Lanka
HDI	Human Development Index
HIES	Household Income and Expenditure Survey
ICPD	International Conference on Population and Development
ILC-UK	International Longevity Centre- United Kingdom
IPS	Institute of Policy Studies
MIPAA	Madrid International Plan of Action on Ageing
MOH	Ministry of Health
MPhil	Master of Philosophy
NCAS	National Centre for Advanced Studies
NIA	National Institute of Ageing
NSE	National Secretariat for Elders
NTA	National Transfer Accounts
OECD	Organization for Economic Co-operation and Development

PGD	Post Graduate Diploma
PHC	Personal Health Care
PPP	Purchasing Power Parity
SAARC	South Asian Association for Regional Cooperation
SL Rs.	Sri Lankan Rupees
SLBFE	Sri Lanka Bureau of Foreign Employment
SMAM	Singulate Mean Age at Marriage
SPSS	Statistical Package for Social Sciences
TFR	Total Fertility Rate
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Fund for Population Activities
USD	US Dollar

# CHAPTER 1

## INTRODUCTION

---

### 1.1 Introduction

Sri Lanka has a rapidly ageing population which presents significant challenges and implications for various types of social and economic issues (United Nations 2008, 2007a). The ageing process has an important relationship with the changing nature, structure and the function of the family (Singh *et al.* 2014; Raikhola and Kuroki 2009). Although the Sri Lankan elderly have traditionally been dependant on family support, a key policy question relates to whether the transition from traditional to modern family can lessen their familial support and influence intergenerational relationships (Aziz and Yusoooff 2012).

Ageing is a universal phenomenon but while the population ageing process in developed countries occurred gradually over a relatively long period of time, ageing in developing countries has been far more rapid (Palloni 2009, p. 8; United Nations 2009, 2002; World Bank 2008). A compressed transition towards an elderly population structure produces an entirely different number of challenges which developing countries are not yet prepared to solve (Palloni 2009, p.8). Sri Lanka is one of the fastest ageing populations in the developing world due to its accelerated demographic transition (De Silva 2010b; World Bank 2008; Siddhisena 2005; Dissanayake and Kaluthantiri 2004). The proportion of the population over 60 years has increased from 5.3 percent in 1953 to 12.2 percent in 2012 and it will further rise to one quarter of the population by 2030 (Department of Census and Statistics 2013a; Siddhisena 2005). Projections show that the population aged 60+ will double between 2012 and 2031 and its' share to the total population will increase from 12.2 to 21.9 percent respectively (Department of Census and Statistics 2013a; Siddhisena 2005). While the 60+ population will grow at 3.6 percent per annum that of the total population is only 0.93 percent (Department of Census and Statistics 2013a; Siddhisena 2005). Therefore, one can expect that this substantial growth in the ageing population can influence Sri Lankan society in numerous ways.

In Sri Lanka, rapid decline in fertility and mortality rates, along with migration, has contributed to reshaping of the age-sex structure of the population (World Bank 2008; Siddhisena 2005). Although Internal and international migration has no direct effect on the size or characteristics of the global population as a whole, it can have a significant impact on the age distribution of certain national and regional populations (United Nations 2009). Sri Lanka also began to experience the effects of international migration on the age structure of its population, especially after the 1980s (World Bank 2012; Nanayakkara 1996). The heavy out-migration of working age people to Middle-Eastern countries for employment opportunities which began after the mid-1970s, resulted in a slight increase in the proportion of the aged population in the country (World Bank 2012). However, the effects of demographic transformation in Sri Lanka had already started showing a smaller proportion of children and a larger proportion of elderly population. Therefore, appropriate interventions are essential to be put in place now to accommodate such changes that will accelerate in the near future.

Similarly, demographic changes in the country have made a significant impact on the nature of family structure. It has been mentioned that family as a social institution has been changing partly due to the changing demographic patterns but also due to modernisation (Harper 2003; Bhat and Dhruvarajan 2001; Palloni 2001). In Sri Lanka, it was shown that the nature of the family and its role has started changing since the 1960s' (De Silva 2005; Dissanayake 1995). Like many developing countries in Asia, the family in Sri Lanka has been the main institution of caring for the aged (World Bank 2008; Amarabandu 2004; Silva 2004). However, the rapid ageing and modernisation processes have placed strain on traditional family support provided by the adult children in the family (Aziz and Yusooff 2012; Raikhola and Kuroki 2009). In this regard, the World Bank (2008, p.9) states that,

- Lower fertility rates translate into fewer children available to provide familial support;
- Higher levels of education increase the generation gap among parents and children and possibly may create transformations in perceptions and attitudes towards responsibilities in providing support to the elderly and the family in general;
- Increased number of females in the labour force reduces the available number of care-givers who are capable in providing older family members with the support they need; and

- International and internal migration is drawing younger persons out of the family.

Ageing was not a major issue in traditional Sri Lankan society since life expectancy at birth was not high and traditional families had a large number of family members to take care of the aged (Abeykoon *et al.* 2008; World Bank 2008; De Silva 1994). However, Sri Lanka gradually experienced a family transformation from its original extended<sup>1</sup> form to nuclear family<sup>2</sup> type (De Silva 2006). Although the family systems vary widely between different societies (Mason 1992), it is true that in most traditional societies the elderly tend to occupy a relatively favourable position (Hugo 1997). Sri Lanka is not an exception to this situation, however, presently there appears to be clear signs of a declining trend in the traditional support system (World Bank 2008). Such strains arising from the changing role of the family can lead to greater pressure on the well-being of the elderly population. It has been found that there is a significant shift from the dominance of emotionally extended family to a nuclear family system in Sri Lanka (Weeratunga and Hugo 2014), as a consequence of demographic and socio-economic changes over the past five decades. In the context of the changing nature of family structure (Abeykoon *et al.* 2008; De Silva 2006; Kottegoda 2006), the capacity of family to take care of their elderly has gradually been eroded. Palloni (2009, p.8) stated that,

“.... the older persons as in many of developing countries, the expectation is that the family will be taking responsibilities on caring for the elderly family members, thus as an unwritten social contract of intergenerational relationship”.

In Sri Lanka, the rapidity of ageing and changing family systems (Abeykoon *et al.* 2008) can lead to problems associated with providing better care for elderly (De Silva 2010b; Siddhisena 2005; Silva 2004). Recent changes in the family system and the relationship between elderly parents and adult children, clearly demonstrate that the adult children find it difficult to cope with the increasing challenges of caring for their elderly parents, as they become weaker and fragile (Alavi 2013, p. 4; Levine *et al.*

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<sup>1</sup> Extended family structure consists of two or more adults who are related, either blood or marriage living in the same home. Thus family consist other than its immediate family such as aunts, uncles, grandparents and cousins (Michelle 2014).

<sup>2</sup> The nuclear family is a small unit consisting of married couple with or without children in a separate dwelling (Michelle 2014).



2005). Although family ties in Sri Lanka have been very strong, intergenerational arrangements have come under considerable strain in more recent years (Silva 2004).

Although literature has identified ageing as a major issue in Sri Lanka, it has failed to concentrate on the impact of the changing role of the family, especially the changing intergenerational responsibilities/supportive system on the ageing population. The Sri Lankan literature further illustrates the lack of policy interventions in the relationship between changing family roles and ageing population (World Bank 2012; Siddhisena 2005; Silva 2004). Therefore, a proper understanding of the relationship between the changing role of the family and an ageing population is an imperative from a policy perspective.

## **1.2 The Aim and Objectives**

This study aims to investigate the complex relationship between the two rapidly changing elements of Sri Lankan society: rapid ageing and the transition from an extended to nuclear family system.

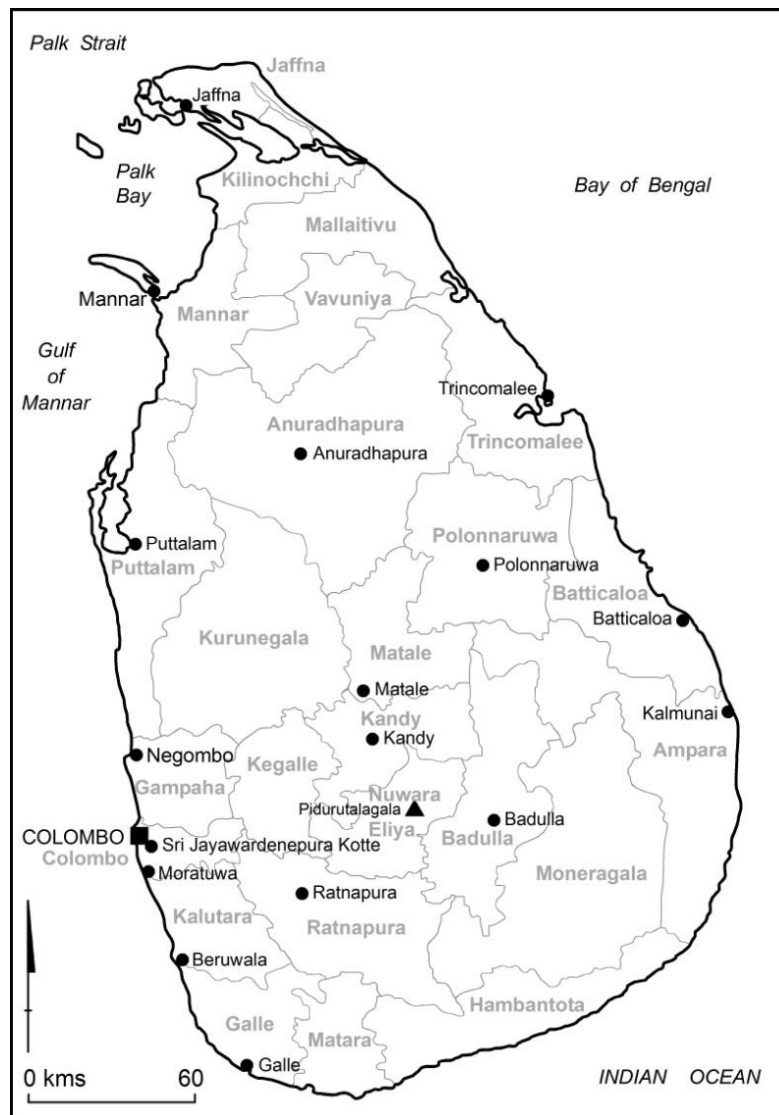
The more specific objectives of this study are to:

- establish the extent, nature and speed of population ageing;
- examine the nature, trends and patterns of family structure and functioning;
- explore the implications of changes in the family for the well-being of the elderly;
- explore the implications of internal and international migration for the care of the elderly;
- investigate the impact of changing intergenerational roles on population ageing; and
- identify policy implications of population ageing in the context of the changing role of the family.

### 1.3 The Demographic Context

Sri Lanka is an island formally known as ‘Ceylon’ located in the Indian Ocean, south-east of India (Figure 1.1). Sri Lanka is located on a minor tectonic plate within the Indo-Australian plate known as the Indian tectonic plate. It is situated in the Indian Ocean south-west of the Bay of Bengal. Sri Lanka encompasses a complete land area of 65,610 km<sup>2</sup>, and comprises of a 1,340 km long coastline. It primarily has two climatic seasons which include two tropical monsoon periods: the December to March northeast monsoon and in June to October the southwest monsoon. Geologically, largely comprising of flat lands and low level terrain, Sri Lanka also consists of a significant mountainous terrain towards the central and south central interior regions.

**Figure 1.1: Map of Sri Lanka**



Source: Data obtained from Department of Census and Statistics

The Sri Lankan population is diverse, ethnically, religiously, linguistically and spatially. Sri Lanka is a multi-ethnic country which is comprised of Sinhalese as the majority, and few other major ethnic groups such as Sri Lankan Tamils, Indian Tamils, Sri Lankan Moors, Burghers and Malays. In addition, various other small ethnic categories are named as ‘other’ in all censuses taken in Sri Lanka. These ethnic groups follow religions such as Buddhism, Hinduism, Islam and Christianity. Among the Sinhalese are Buddhists and Christians while there are Hindus and Christians among the Tamils too (Department of Census and Statistics 2013a). Therefore, Sri Lanka is a country representing the features of a multi - cultural society.

**Table 1.1: Sri Lanka: Composition of the Population by Ethnicity and Religion, 2012**

<b>Ethnicity</b>	<b>Percentage</b>	<b>Religion</b>	<b>Percentage</b>
Sinhalese	74.9	Buddhists	70.2
Sri Lankan Tamils	11.2	Hindus	12.6
Indian Tamils	4.2	Muslims	9.7
Muslims	9.2	Christians	7.4
Other	0.5	Other	0.1

Source: Department of Census and Statistics 2013a

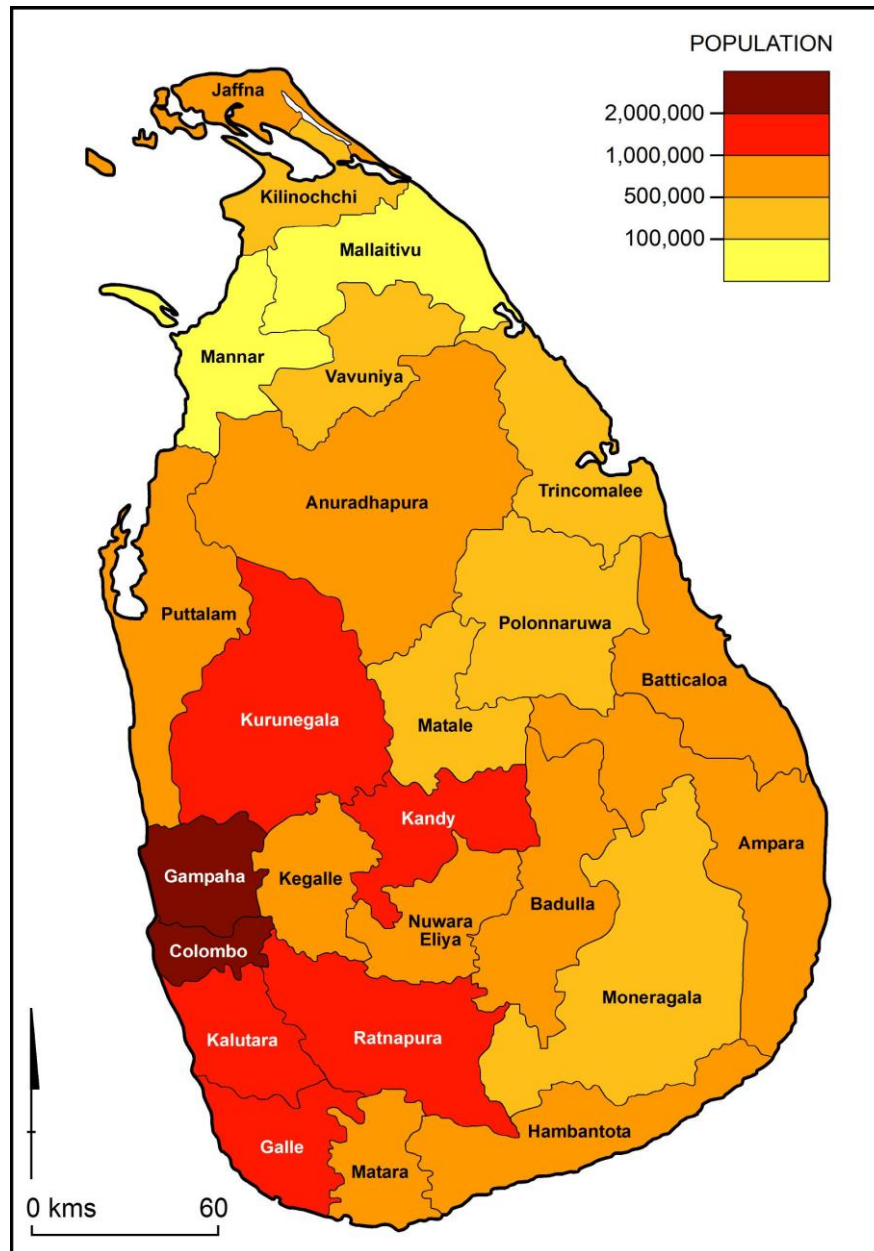
Sri Lanka consists of nine provinces: Western, Southern, Central, Northern, Eastern, North Western, North Central, Uva and Sabaragamuwa. Among them, there are 25 districts as shown in the District map of Sri Lanka (Figure 1.2). The Population of Sri Lanka is recorded in the recently held census in 2012 as 20.3 million. Of this population 18.3 percent reside in the urban sector, 77.3 percent in the rural sector and the rest 4.4 percent live in the estate sector. Although the urban and rural populations in Sri Lanka are spatially distributed all over Sri Lanka, the estate sector population is concentrated in the plantation areas. The average annual population growth rate from 1981 to 2012<sup>3</sup> was 1.0 percent and the total population increased during this period was 5.4 million which is a 36 percent increase (Department of Census and Statistics 2013a). Furthermore, the population density of Sri Lanka was 323 persons per km<sup>2</sup> in 2012, while Colombo 3417 persons per km<sup>2</sup> was the most densely inhabited district followed by Gampaha 1711 persons per km<sup>2</sup>. The lowest densities are seen in Mullativu 38

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<sup>3</sup> Average Annual Growth Rate of the Population was computed from 1981 to 2012 as there were no complete enumeration in between.

persons per km<sup>2</sup> and Mannar 53 persons per km<sup>2</sup> (Department of Census and Statistics 2013a).

**Figure 1.2: Population Distribution of Sri Lanka by Districts, 2012**



Source: Data obtained from Department of Census and Statistics

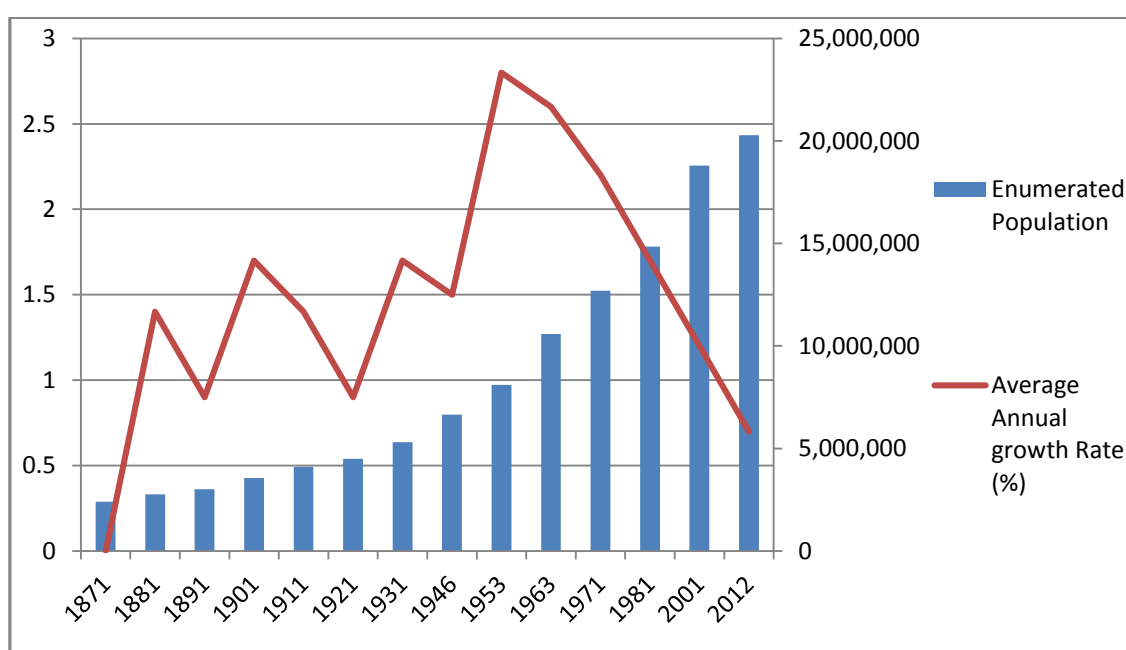
Sri Lanka's fertility transition commenced in the 1960s (Dissanayake 1995) and presently Sri Lanka is still in the third stage of the demographic transition<sup>4</sup>, which is the 'late expanding stage'. Sri Lanka began its' fertility transition well ahead of other

<sup>4</sup> Demographic transition refers to the movement of death and birth rates in a society, from a situation where both are high-in the pre-transitional stage- to one where both are low-in the post-transitional stage (Rowland 2003).

nations in the SAARC region, but still has not been able to change its' low stationary stage of its' fertility (World Bank 2012). Mortality in Sri Lanka has declined significantly during the second part of the 20<sup>th</sup> century and it is now experiencing a low death rate with a Crude Death Rate (CDR) of about 6 per 1000 population (Department of Census and Statistics 2013a).

Figure 1.3 shows that the growth of the population has taken an exponential turn from the mid-1920s up to 1950s coinciding with the mortality decline and high stationary fertility which produced a high population growth in Sri Lanka. The enumerated total population of Sri Lanka recorded in 2012 was 20.3 million while the average annual population growth of 0.7 percent was recorded during the 2001-2012 inter-censal period. The population still grows exponentially although the growth has shown a declining trend in recent decades.

**Figure 1.3: Sri Lanka: Growth of Total Population and Rate of Population Growth, 1871 to 2012**



Source: Department of Census and Statistics 2013a

Table 1.2 shows that the Sri Lankan population is currently ageing with the median age increasing from 25 years in 2001 to an estimated projected 42.4 years in 2041 (World Bank 2012; De Silva 2007). When a comparison is made with other South Asian countries, Sri Lanka has the largest percentage of elderly population including the oldest age group (80+). Unlike most other South Asian countries, Sri Lanka's old

age is more feminised, with the sex ratio expected to decrease further from 85 in 2012 to 80 in 2050, indicating that more women will survive to advanced ages in future years.

**Table 1.2: Selected Indicators of Ageing in Countries of South Asia, 2012 and 2050**

Country	Number (thousands) aged 60+		Percentage of total population aged 60+		Percentage of total population aged 80+		Sex Ratio (men per 100 women) 2012	
	2012	2050	2012	2050	2012	2050	60+	80+
Afghanistan	1,258	5,130	3.8	6.7	0.2	0.4	98	83
Bangladesh	10,288	43,582	6.8	22.4	0.7	3.0	96	112
Bhutan	54	232	7.2	24.1	0.8	2.9	107	87
India	100,213	323,092	8.0	19.1	0.7	2.6	92	92
Maldives	23	126	7.0	31.2	0.8	5.0	111	146
Nepal	1,995	7,859	6.4	16.9	0.5	1.9	81	73
Pakistan	11,698	43,305	6.5	15.8	0.6	1.7	105	108
<b>Sri Lanka</b>	<b>2,741</b>	<b>6,366</b>	<b>12.9</b>	<b>27.4</b>	<b>1.6</b>	<b>6.1</b>	<b>85</b>	<b>80</b>

Source: UNFPA 2012, p. 168-170, <http://www.unfpa.org/.../2012/UNFPA-Report>

The age distribution which favours the elderly population can influence the social and economic development of a country because of the heavy dependency burden. Table 1.3 shows the percentage of the aged population in the urban, rural and estate sectors in Sri Lanka. The percentage of the population 60 years and above in the urban sector is almost 15 percent when compared to 13 percent in the rural sector. It clearly shows that the Sri Lankan population is ageing in a significant way with the elderly population in the estate sector being lower than in the other two sectors of Sri Lanka because this sector experienced its' fertility transition later than the other two sectors (Dissanayake 1995).

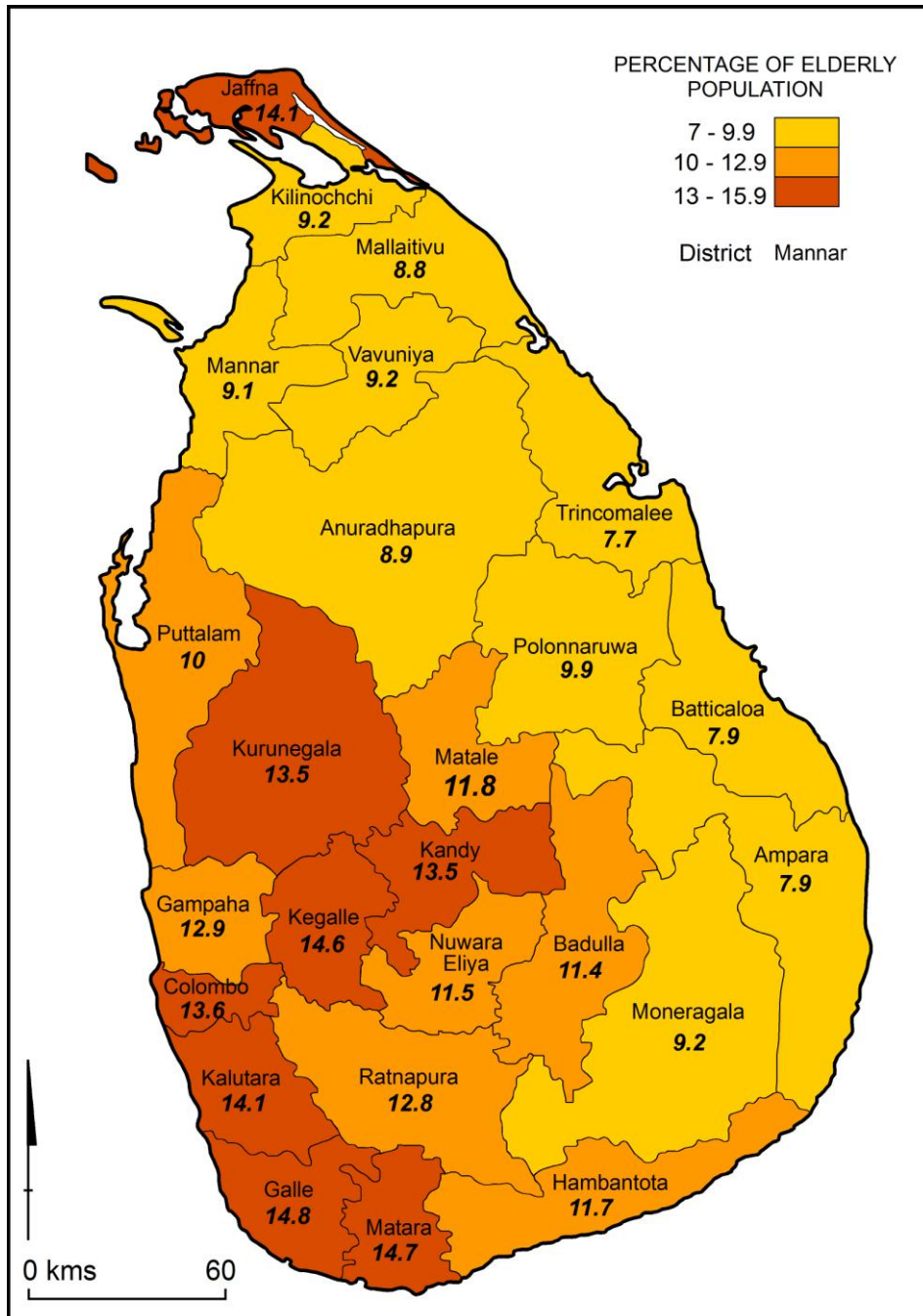
**Table 1.3: Sri Lanka: Population by Selected Age Groups and Sector, 2012**

Sector	Age group( years)			
	0-14 (percent)	15-59 (percent)	60 and over (percent)	Total (percent)
Sri Lanka	25.7	61.1	13.2	100
Urban	24.2	61.0	14.8	100
Rural	25.8	61.2	13.0	100
Estate	28.6	59.1	12.3	100

Source: Department and Census and Statistics 2013b , p. 7

Figure 1.4 shows the spatial distribution of the aged population, which recorded more than 14 percent of population aged 60 years and above within three districts in the Southern Province (Galle, Matara and Kalutara), one district in Central Province (Kegalle) and one district in North Province (Jaffna). However, in general, all districts of the country show a significant proportion of ageing population.

**Figure 1.4: Population (60+) in Districts of Sri Lanka, 2012**

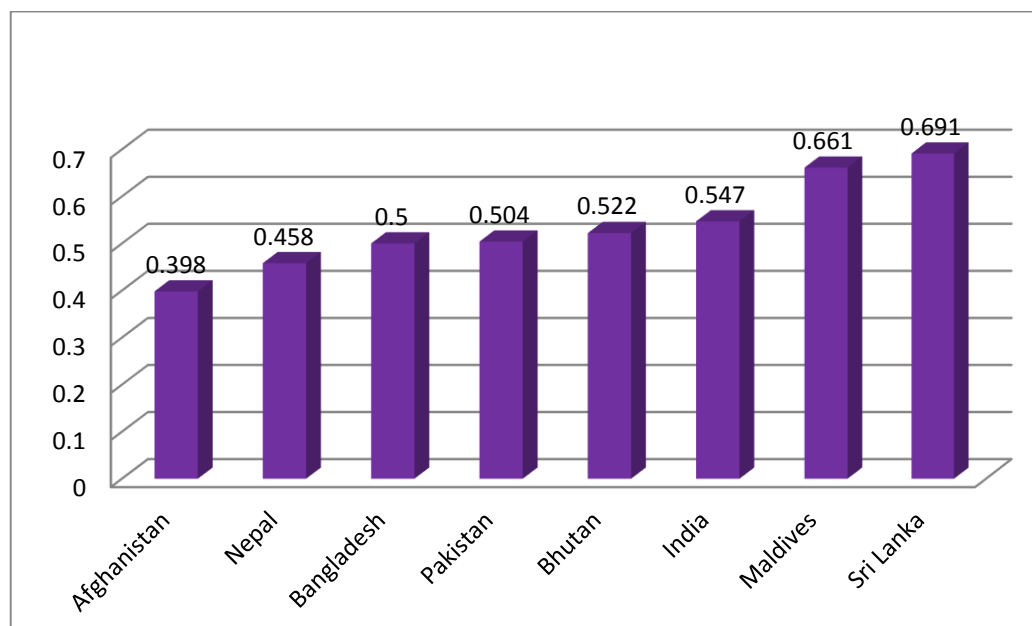


Source: Data obtained from Department of Census and Statistics 2013a

## 1.4 Social and Economic Development

Sri Lanka is well ahead of its' South Asian neighbours in the achievement of human development goals, and displays the highest level of human development in the SAARC region (Figure 1.5). Sri Lanka is ranked 97 out of 187 countries, but there is still room for further improvement (UNDP 2012).

**Figure 1.5: Human Development Index in Countries of South Asia, 2011**



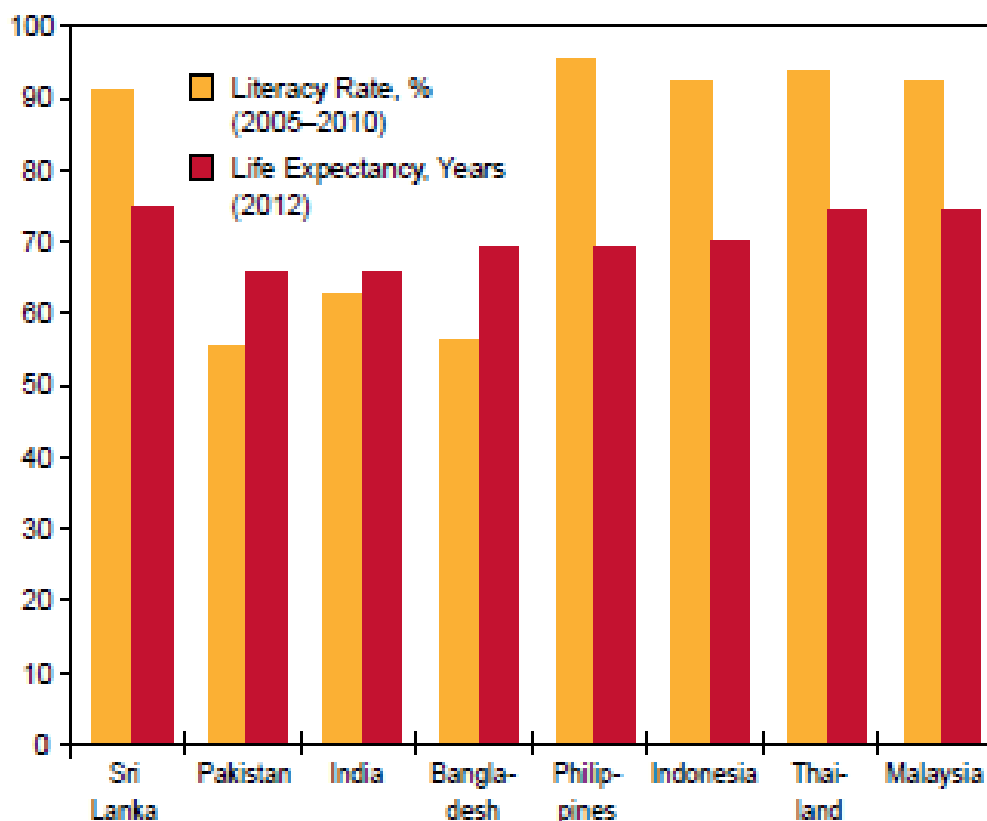
Source: UNDP 2012, p. 15

Literacy and life expectancy values are most often being used to compare social development across communities. Figure 1.6 shows that the literacy rate and life expectancy at birth are relatively high compared to the other South Asian countries, while health conditions appear to be better in Sri Lanka compared to some of the East-Asian countries. Free education facilities available to the entire population have made rapid advances in literacy levels irrespective of the socio-economic status. The education ordinances of 1939 and free education act in 1945 were the key landmarks which achieved universal and equal access to education feasible at all levels (Ministry of Education 2004). Similarly, a substantial investment in health over the years has paved the way for Sri Lanka to attain admirable health outcomes. Sri Lanka's public health care is provided free of charge at public hospitals. However, this still does not meet the demand as the public health sector serves only about 60 percent of the



population. Gradually, the private health care sector has increased over time as the private hospitals grew from 46 in 1990 to 90 in 2008 (Institute of Policy Studies 2011).

**Figure 1.6: Social Indicators in Comparative Perspective, 2012**



Source: Central Bank of Sri Lanka 2013, p. 7

In economic terms, Sri Lanka has been performing well after the conclusion of its' civil war in 2009. The Sri Lankan economy grew by 6.4 percent in 2010 while inflation was preserved at single digit for a fourth consecutive year, regardless of numerous global and domestic challenges. The Government of Sri Lanka is confident that the economic growth will increase to 7.5 to 8.0 percent during the medium term between 2014-2016, by maintaining a growth in the real economy well in excess of the expected 5-6 percent inflation (Budget Speech 2014). Sri Lanka's GDP Per Capita<sup>5</sup> adjusted for PPP<sup>6</sup> is

<sup>5</sup> Gross Domestic Product (GDP) is the monetary value of all the finished goods and services produced within a country's borders in a specific time period, though GDP is usually calculated on an annual basis. It includes all of private and public consumption, government outlays, investments and exports less imports that occur within a defined territory ([www.investopedia.com/terms/g/gdp.asp](http://www.investopedia.com/terms/g/gdp.asp)).

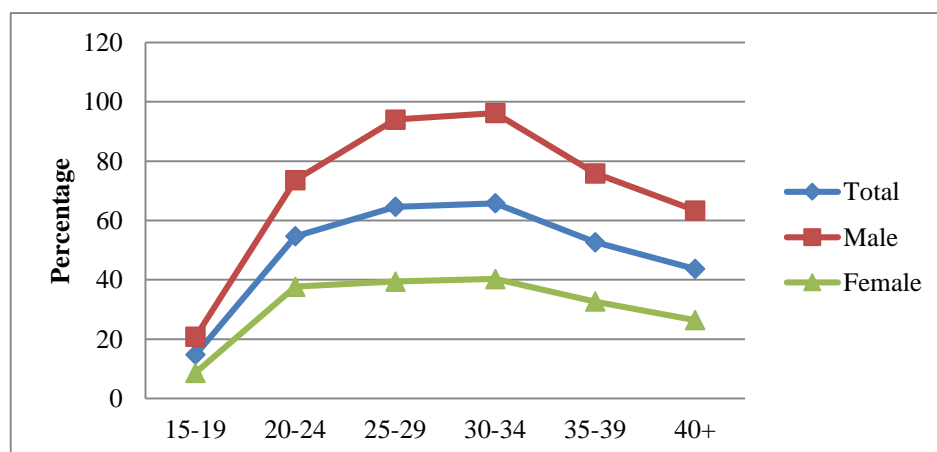
<sup>6</sup>Purchasing Power Parity (PPP) is an economic theory that estimates the amount of adjustment needed on the exchange rate between countries in order for the exchange to be equivalent to each currency's purchasing power ([www.investopedia.com/terms/g/gdp.asp](http://www.investopedia.com/terms/g/gdp.asp)).

relatively high by South Asian standards (Central Bank 2013, p. 7). The GDP growth of Sri Lanka is high even in a global perspective, and is very impressive for a developing country (Central Bank 2013, p. 7).

Sri Lanka has entered into a new era of development after three decades of civil war which concluded in 2009. The Sri Lankan economy performed with an average growth rate of 6.4 percent in 2005-2010. This provided an opportunity for the country to lift its' per capita income from USD 1,241 in 2005 to USD 2,329 in 2010 (Ministry of Finance and Planning 2011). The government's policy agenda which is popularly known as *Mahinda Chintana*, "*Vision for the Future*" expects to achieve growth rates of above 8 percent per annum and then expected to double the current per capita income to reach around USD 4,000 by 2016 (Ministry of Finance and Planning 2011).

Sri Lanka's labour market is rapidly changing because of the changes in demographic structure occurring to the working age population, an increase in international labour migration and a decline in unemployment (Department of Census and Statistics 2013c). In 2012, 8.5 million of the population were economically active in Sri Lanka while 5.6 million (66.6 percent) of them were males. The majority of the economically inactive population were females (70.3 percent) while 29.7 percent were males (Department of Census and Statistics 2013c, p.7). The unemployment rate in the country declined considerably from 7.6 in 2000 to 4.0 percent in 2012 (Central Bank 2013). Figure 1.7 shows that the labour force participation rates, for the age group of 25-35 years had increased for both males and females. It further shows that the rates drop after age 40 for both males and females in a similar fashion.

**Figure 1.7: Sri Lanka: Labour Force Participation Rates by Age and Gender, 2013**

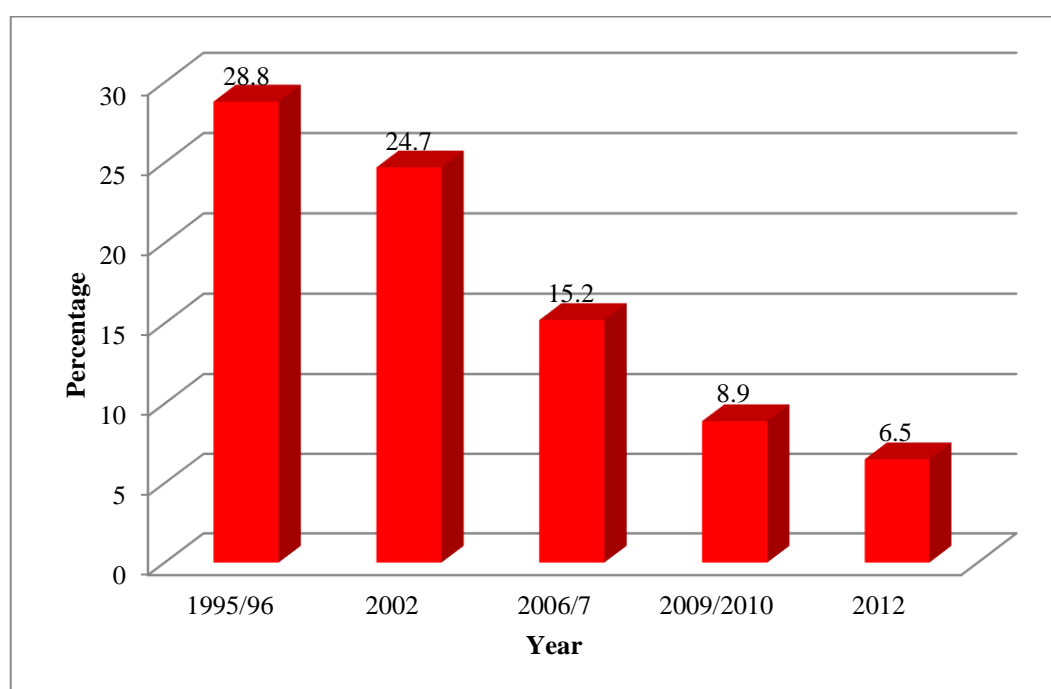


Source: Department of Census and Statistics 2013c, p. 10

The unemployment rate at the national level was 4.0 percent in 2012 and for the urban and rural sectors 3.7 percent and 4.0 percent respectively (Department of Census and Statistics 2013c, p.20). Rural female unemployment rate (6.3 percent) was slightly higher than the urban female unemployment rate (6.1 percent), and at the national level, the unemployment rates for females (6.2 percent) was double that of the male unemployment rates (2.8 percent)( Department of Census and Statistics 2013c, p. 20).

Figure 1.8 shows that the poverty level of the country has declined from 15.2 percent in 2006/2007 to 6.5 percent in 2012/2013. Projected Poverty Head Count Ratio<sup>7</sup> for the year 2016 is expected to be 4.2 percent (Department of Census and Statistics 2013b). According to the Household Income and Expenditure Survey (HIES), 20 percent of the households are high income, 60 percent are middle income and 20 percent are the poorest (Department of Census and Statistics 2013b, p. 19). The richest households are receiving nearly 53.5 percent, the poorest are receiving 4.4 percent and the middle income groups are receiving 42.1 percent of total household income of Sri Lanka (Department of Census and Statistics 2013b, p. 19).

**Figure 1.8: Sri Lanka: Poverty Head Count Ratios, 1995-2012**



Source: Department of Census and Statistics 2013b, p. 41

<sup>7</sup> Poverty Head count ratio simply indicates the proportion of poor populations in a domain or count of persons below the poverty line as a percentage of the total population in the domain( Department of Census and Statistics, 2013, p. 41)

## **1.5 Studies of the Relationship between Ageing and Family Change**

There is a growing interest among researchers studying the relationship between ageing and family change in the developing world. This is mainly because of the rapid demographic, social and economic transformation in developing countries. It has been pointed out that population has aged due to the combined effects of falling mortality which leads to increased longevity, and falling fertility within the population which tends to lag mortality improvements (United Nations 2013; Harper 2003). This demographic change makes a significant impact on family structures and resultant relationships because of the emergence of vertical multi-generational families replacing the former laterally extended family forms (Harper and Levin 2003, p. 2). When life expectancy increases while total fertility rates decrease, the number of generations that co-exist also increase (Harper 2006). In developed societies, this phenomenon has created the ‘beanpole family’, which is explained as a phenomenon where there exists a large number of living generations of certain related ancestry, but also comprising a limited number of people within each age group, which can be seen as a perpendicular extension of family structure (NIA 2007, p. 16). Multi-generational households are declining in the more developed world but two and three generation households are still the norm in most less developed countries (NIA 2007). It has been indicated that various socio-economic trends affect the functioning of intergenerational family relations (Lloyd 2008, p. iv) as shown below:

- Increasing long life makes growing gaps among the youngest and oldest persons in the social order;
- Potential restrictions in opportunities for interaction among generations due to internal migration related to different stages in life;
- Various cohorts experiencing continuous socialisation, globalisation creating high levels of cultural, technological, economic and social change make differences in individualities and experiences among different cohorts; and
- Monetary stresses accompanying demographic change can result in competition amongst different age groups in relation to availability and use of public resources, and therefore may create conflict over precedence of expenses and usage of public spaces.

In less developed countries, many of the social changes associated with modern economic development are a recent phenomenon (Long and Pfau 2009; Velkoff 2002). However, the overarching question in these countries is whether the basic family structures will come to resemble those of the so-called Western Model (Velkoff 2002). Developing societies are experiencing dramatic changes in an environment brought

about by economic development (Aziz and Yusoooff 2012; Palloni 2009). The World Bank (1994) reported that family change is breaking down the informal support systems previously available for the elderly people in developing countries today. It has also been pointed out that changes in familial support for the elderly are being caused by industrialisation, globalisation, migration and urbanisation (Chan 2005). East and South East Asian countries have shown rapid economic and social development which resulted in significant changes in family relationships. Compared to the Western world, the governments of Asian countries have had little time to get ready for population ageing because of the rapid changes experienced by those countries today (Palloni 2009). Families in Asia which have been heavily reliant on family based support to take care of elders are stressed due to the rapid growth in the number of the elderly people. At the same time, information concerning the effectiveness of formal programmes for the elderly population is scarce in the developing world (Mason and Lee 2011).

An understanding of the nature of the family and intergenerational relations strongly depends on understanding the structural changes of the family (Kinsella and Phillips 2005, p. 2). It has been shown that the countries which have lower birth rates will have fewer children (Kinsella and Phillips 2005). This suggests a reduction of potential care-givers for older parents which will destroy the traditional support system (Powell 2010; Kinsella and Phillips 2005). However, the types of relationships have changed in a substantial manner during the last few decades. The ageing process can also have a great impact on family systems because they can affect living arrangements and the future well-being of elderly populations (Palloni 2001).

Changing economic structures, increased mobility of people, changing attitudes and an increasing number of dual-career families, have led to an erosion of traditional values under which children held parents in high regard and considered as their sacred duty to care for elderly parents (Bhat and Dhruvarajan 2001, p. 637). One of the most important attributes of the traditional extended family is its' potential for caring for the elderly population as a result of the social relations and interactions among kin groups, as well as roles and responsibilities of different age groups (Mba 2010,2002).

Economic transformation is also creating potential problems for the elderly because of the economic structural changes arising from economies changing from being

agricultural-based to industrial production, as well as due to the strong flows of labour from rural to urban areas with the increase in urbanisation (Long and Pfau 2009). Mason (1992) and Schwarz (2003) have argued that economic transformation with urbanisation and increasing migration may weaken the traditional family structure and remove the traditional means of care for the elderly.

Kinsella (1996) states that tomorrow's elderly will have fewer off-spring upon whom to be dependent, nonetheless this may be counter-balanced by the amplified combined survival of partners. This can also be inter-linked to declines in fertility currently portrayed in most developing nations. It has also been shown that when elderly people live longer, their changing life patterns reduce the potential care-givers' availability for elderly parents (NIA 2011; Powell 2010).

Schröder-Butterfill (2006), in her study in Indonesia observed different vulnerability status among elderly people. She further showed that not all elderly persons experience bad situations, but the absence of children and/or spouse can increase the vulnerability status of the elderly. For example, in rural Java this can be due to the existence of a significant proportion of nuclear families because of childlessness. Weaver (1986) looked at South and Central Asian countries, to find that there has been an extensive tradition of supporting the older participants of the family, a feature which is still predominant, and provides economic sanctuary for the majority of the aged. Nonetheless, changing family arrangements and the size of families have destabilised this security system for older individuals. One of the imperative side effects of population ageing is the upsurge in the amount of generations in families and the appearance of a considerable generation of older persons who potentially are dependent upon adult children.

### **1.5.1 Changing Nature of Living Arrangements**

Living arrangements are viewed as a very important indicator which can help to understand the well-being status of the elderly (Ahmad and Das 2011). By analysing DHS Household data of the living arrangements of older adults across the developing world, Bongaarts and Zimmer (2001, p. 5) showed that:

- There exists a strong correlation between living arrangements and co-residence for the elderly with children;

- In developing countries, the elderly mostly reside with their spouse or with an adult child but rarely live alone;
- Males tend to live with a spouse at elderly stages of life compared to females;
- Both parents and children benefit from collective living;
- Younger generations provide health, social and financial assistance required by elderly adults; and
- Elderly take part in reciprocal exchange when they partake in caring for younger children of the household or take care of the home in the absence of elderly children.

Ahmad and Das (2011, p. 7) also state that family is often a significant source of care and support for the elderly where public social security schemes and social services are absent or negligible. Elderly in these situations are largely relying on family members as their economic productivity and physical strength declines with advancing age.

### **1.5.2 Trends on Living Arrangements**

Large proportions of older people live alone in many industrial countries at present and the proportion is higher in the oldest age group (United Nations 2013; Kinsella and Phillips 2005, p. 28). The tendency of the elderly to reside alone has been prominent in the developed countries, such as the United States where the majority of ageing persons are self-sufficient (Engelhardt and Gruber 2004; McGarry and Schoeni 2000; Costa 1998). Similarly, current trends in the living arrangements of the elderly in developing countries have shown an increasing percentage of elderly living alone. Bongaarts and Zimmer (2001) showed by analysing the DHS household surveys of developing countries that nearly one in ten older adults live alone, and the probability of living alone is greater for older women than men. It has also been pointed out that living alone and getting support from the family are viewed as mutually exclusive, because in order to get care from the family they need to live together (Lei *et al.* 2011, p. 6). Literature on ageing studies in developing countries shows that older people want to live with their children or at least close to them (Kinsella and Phillips 2005) to receive support from their adult children. Panigrahi (2009) shows that although the majority of elders co-reside with their spouse or children in Orissa, India at present, the changing socio-economic and demographic scenarios, such as increasing education of children and income, and a simultaneous decline of fertility, can increase the likelihood of a higher proportion of elderly living alone in the future. Similarly, the World Bank study of the Elderly in Sri Lanka (2008) and National Elderly Survey, (2004) have shown that

although the majority of elderly people co-reside with their adult children, there will be significant changes in living arrangements in the near future. Siddhisena (2014) and Silva (2004) further showed that there is a growing demand for older people entering elderly homes in Sri Lanka. When summarising all the demographic, social and economic changes leading to an increase in the elderly population in the near future, as well the effects of changing role of the family, it is clear that there is a greater likelihood of more and more elderly living alone.

Bongaarts and Zimmer (2001, p. 24) show that the co-residence rates are higher in Asia, Africa and Latin America. However, the African elderly are more likely to live alone compared to elderly Latin Americans. It has been shown that the majority of elderly Malaysians are living with children (Alavi 2013). Further, Philippines, Thailand, Taiwan, Singapore and Indonesia show similar trends of co-residence (Chan 2005; Cameron 2000). Sri Lanka also demonstrates that the majority are still co-residing with spouse and or children (World Bank 2008; Siddhisena 2005; NSE 2004).

Lei *et al.* (2011) show that living close to each other solves the conflict between privacy, independence and family support. They also reveal that living close to parents has become an important way of providing elderly support while at the same time maintaining independence/privacy for both parents and children. It has been found that children residing near their parents tend to visit more frequently than those living further away and provide more financial support to parents. However, it further shows that co-residence is still functioning as an important source of elderly support. Also having parents live with one child reduces the burden on other children in terms of visiting and the likelihood of making financial transfers.

Older peoples' living arrangements reflect their need for family, community or institutional support and indicate socio-cultural preferences (NIA 2007). Knodel and Chayovan (2008) show that 70 percent of elderly in Thailand live with children or close to their childrens' residence. However, the percentage of elderly living alone or with spouse has gradually increased over recent years. Moreover, there is an increasing trend of skipped generation households in Thailand with an absence of middle generational married adults due to increasing levels of migration among adult children. Cameron (2000); Palloni *et al.* (1999); Knodel and Chayovan (1997); Chen (1996);



Martin (1989) have come to the conclusion that elderly persons prefer to co-reside with their kin, particularly with their partner and children.

Mba (2003, p. 3) has shown that co-residence of the elderly provides benefit to both sides. This is because while the elderly persons depend on the younger generation for financial, social and health care support, the latter depend on the former to look after the home when they are away or take care of the younger generation. It has been shown that kin co-residence is more prevalent in rural areas, and there is an contrary affiliation among higher educational accomplishment and co-residing with off-spring (Palloni *et al.* 1999; Natividad and Cruz 1997; DaVanzo and Chan 1994). The demand for co-residence with children or kin is high in societies with uneven institutionalisation of social transfers, low level of human capital investment and health (Palloni 2001).

Giang and Pfau (2007) have shown that family relations have been maintained strongly despite the rapid economic and social changes experienced during recent decades. They found that a high proportion of elderly living with their children, particularly with sons without depending on them. Equally, elderly parents are still continuously contributing to the family circle in numerous ways. However, fears are developing that widows or single women with no off-spring may not have adequate assistance if not supported by next of kin or extended family members (NIA 2007).

### **1.5.3 Intergenerational Support/ Care**

Public and family transfers are the most important sources of support for the majority of the elderly (United Nations 2013). They determine the well-being of the elderly population. Public transfers include pensions, disability income, health payments and transfers in the form of subsidies for institutionalisation, home care and housing (United Nations 2013; Palloni 2001, p. 7-8). Those are referred to as formal transfers. Family transfers are the exchanges between family members and are considered as informal transfers. Although the public transfers are well developed in the Western world they are still either non-existent or poorly developed in developing countries. However, informal transfers or familial transfers still prevail in developing countries (Ahmad and Das 2011). Literature shows that a solid sense of responsibility and filial piety are both prevalent and central towards parents and elderly in Asian countries (Lin and Yi 2011; Xu and Chi 2011). These cultural patterns maintain customs that strengthen

intergenerational transfers towards the aged and create a strong inclination for co-residence (Pfau and Giang 2009). Though care and support are two different dimensions, support broadly can be defined as financial assistance, whereas care is defined as emotional support (Ahmad and Das 2011, p. 6). Financial support can be provided by the state and other private institutions and the family, but the emotional support can only be provided by family members, relatives and other cohabitants (Ahmad and Das 2011).

Research studies undertaken in Asia have shown that living arrangements such as co-residence with an adult child has been the main support from adult children to elderly parents (Keasberry 2001; Cameron 2000; Knodel and Saengtienchai 1999; Knodel and Debavalya 1997; Hashimoto 1991). However, more recently, leading demographers of ageing in Asia have started to voice doubts about some of the dominant assumptions and approaches in the field which suggest that elderly are depending on their adult children in their old age (Schroder-Butterfill 2003, p. 3). Although most researchers are concerned with the living arrangements of the elderly as an inadequate indicator of welfare or support for the elderly, it is necessary to investigate actual exchanges within and beyond households in order to assess the intergenerational flow of support (Schroder-Butterfill 2003; Kreager 2001; Hermalin 2000; Knodel and Saengtienchai 1999; Natividad and Cruz 1997). Knodel and Chayon (2008) have shown that adult children are the main source of income support of elderly parents. Social contacts between elderly parents and adult children are still strong and it is the most effective way of communicating with adult children, especially with the adult children who have migrated. A substantial proportion of non-resident adult children communicate either weekly or monthly over the phone and it was observed that only a small minority of children do not provide any support or contact with elderly parents. Although this study has highlighted the intergenerational support from adult children to elderly parents it failed to capture the two way support between elderly parents and adult children since elderly parents are not only care recipients but also care providers for adult children.

By studying Malaysian rural aged people, Aziz and Yusoof (2012) showed that the rural Malaysian extended family is still the norm for exchanging mutual support. The kinship networks are very strong and children show positive and responsible attitudes towards their parents. Zhuo and Liang (2006) studied the extent to which migration of

the younger generation affects the happiness and longevity of the ageing population of rural China, whereby they found that aged persons having migrated children that have higher levels of economic support and better living conditions from their children, compared to those who have circumstances where their children live nearby or have not migrated. However, they further argued that the psychological status of parents was not significant. Although this study shows the financial support from adult migrant children to elderly parents in rural China, the support from migrant parents for the families left behind as well as living arrangements of their parents also was not studied.

Lawton *et al.* (1994) have shown that the interaction between different combinations of family members and children are different. Mothers may view as important the frequency of interaction to maintain the quality of the relationship with children and husband, while the fathers' interaction may be motivated more by instrumental or obligatory concerns and based on less personal affinity. Umberson (1992) has shown that the quality of the adult children and parents relationships affects the psychological functioning of both generations. They also found that individualism appears to be a dominant societal routine which may affect the psychological relationships between both elderly parents and adult children.

Yi and Lin (2009) focused upon the differences in intergenerational relations among the co-residence of adult children with their elderly parents and non-co-resident adult children with their parents in Taiwan. Both co-residing and non-co-residing adult children have indicated that family ties exist between generations in the traditional society irrespective of the co-residential status. Co-resident children have expressed higher endorsement of filial norm showing their higher expectation to receive parental help around the house due to geographical feasibility. In contrast, non-co-resident children have a higher tendency to provide money to parents and a lower tendency to receive money from parents. Among Taiwanese, the majority of adult children who do not co-reside with their parents have indicated that parents are not higher priority than their spouse and children (Yi and Lin 2009, p. 321).

Schroder-Butterfill (2003) has found in her study in Indonesia, although conventionally assumed that co-residence with a child is indication of net flows of support from younger to old, the close examination of elderly people revealed that in almost half of the cases, the elderly generation represented the economic backbone of the household.

Therefore, the wealth flows in these arrangements are unequivocally downward. Subedi (2003, p. 41) shows that the majority of elderly in Nepal contribute significantly to household activities. Giang and Pfau (2007) have also shown that the elderly in Vietnam support their adult children more than they receive from them. Moreover, it has been shown that the elderly in Pakistan make available financial assistance to the family from their savings. In such occurrences, it appears that the financial standing of the elderly is clearly related to their capability to be independent.

Alavi (2013) has shown that the changing family structure of Malaysia has made a significant impact upon the relationship between older parents and their adult children. It has been pointed out by Alavi that the relationships between older parents and their adult children today incorporates roles and responsibilities, parents-child interaction, quality relationship and care-giving. Alavi's study further revealed that the relationships and care-giving seem to fall upon the shoulders of daughters more frequently than sons. Albertini and Radl (2012) have tried to look at the association between occupational social class and parental transfer behaviour, and found that those parents who are in the upper classes transfer more resources to their adult children than the working class parents.

Mason and Lee (2011, p.4) provide important insights into the intergenerational support around the world:

- The role of families in old age support varies but there are important regional patterns;
- Net family transfers tend to be more important source of support for the elderly in Asia than in Latin America and the United States;
- In Taiwan family transfers fund is approximately half of upkeep for the ageing, one-third in Thailand and about one fifth in South Korea;
- Family transfers to persons over the age of 65 are in effect zero in Japan. This is because the Japanese, until they reach their late 70s tend to provide more than what they receive in terms of wealth to progenies, however reaching 70, the situation turns and they obtain more than what they offer;
- Recent figures imply that total family transfers received by the elderly in Taiwan and South Korea are declining;
- Looking beyond the Asia, in Mexico and the United States, the ageing tend to give more assistance to their families than they stand to be given during the course of old age eg: Indonesia; and
- Asian countries seem to be in a transitional period and elderly less rely on assistance of their off-spring and next of kin as they previously did.

These trends around the world illustrate that changing family roles with increased modernisation as indicated by Hugo (2002), tend to have a significant impact on ageing populations in developing countries.

#### **1.5.4 Studies of Ageing and Family Change in Sri Lanka**

There has been a growing interest to study population ageing recently because of the rising percentage of the aged in Sri Lanka. However, when reviewing the literature related to ageing in Sri Lanka, it can be argued that such studies have not adequately focused on the relationship between the changing role of the family and ageing but mainly on trends and characteristics of the elderly and their well-being. Available literature on ageing in Sri Lanka can be summarised as follows:

- Demographic factors that determine the volume of aged population (World Bank 2008; United Nations 2007a; Gaminirathne 2004; Siddhisena 2000, 2004; Abeykoon 1999; Abeykoon 1996; De Silva 1994);
- Demographic, socio-economic characteristics of ageing population (Siddhisena 2005; Dissanayake and Kaluthantiri 2004; Siddhisena 2004, 2000; Abeykoon 1996; DeSilva 1994 );
- Urban-rural differences of ageing populations (NSE 2004; Siddhisena 2004);
- Health and ageing (World Bank 2008; Rannan-Eliya 2008; Senevirathne 2004; Abeykoon 2000; Nugegoda and Balasuriya 1995);
- Social and economic aspects of ageing (Vodopivec and Arunatilake 2008; United Nations 2007a; Siddhisena 2005; Dissanayake and Kaluthantiri 2004; Gaminirathne 2004; Rodrigo 2000; De Silva 1994);
- Welfare of the elderly population (Vodopivec and Arunatilake 2008; World Bank 2008; Amarabandu 2004; Gaminirathne 2004; Wijewardane 1999);
- Ageing and family change (World Bank 2008; Siddhisena 2005; Perera 1999; Marga Institute 1998; Uhlenberg 1996; De Silva 1994); and
- Ageing, living arrangements and intergenerational support (World Bank 2008, Siddhisena 2005; NSE 2004; Perera 1999; Marga Institute 1998; Uhlenberg 1996).

These studies which have mentioned the changing role of the family, intergenerational transfers and ageing populations are reviewed below in order to find whether any of them have sufficiently examined the relationship. This will also provide an opportunity

to find gaps in the literature in relation to the above topic and to provide empirical evidence to fill any gaps through field work in Sri Lanka.

It has been pointed out that the changing family structures may have an influence on the welfare of the older generations in Sri Lanka (United Nations 2013; De Silva 2010b; Powell 2010; Mujahid and Siddhisena 2009; Pfau and Giang 2009; World Bank 2008; Siddhisena 2005), but have not been studied in detail in order to provide a comprehensive picture of the relationship between changing family structure and the well-being of the elderly. It has also been shown that the changing family structures in Sri Lanka can influence requirements for a formal support system (World Bank 2008; Siddhisena 2005; Silva 2004). Factors, such as marital status, fertility, mortality and migration, have been cited as important to shape the family and generational structures (United Nations 2013; Harper 2006). Literature has tended to examine the traditional avenues of the general life cycle of individuals and hence, failed to concentrate on their consequences on the living arrangements and intergenerational support that affect their later life.

It has been claimed, that the intergenerational arrangements for the elderly have been only partially addressed in the Sri Lankan literature on ageing (Siddhisena 2005; Silva 2004; Uhlenberg 1996). Siddhisena (2005) has examined the existing social and economic support system for the elderly, the problem of better care for the elderly and the erosion of traditional based support systems. However, he has shown that co-residence with children does not mean that they receive better support from the family. Silva (2004) stated that home care for the elderly remains important but the intergenerational care system has changed. The responsibilities of the younger generation to the older generation seem to be widely accepted by the society and the significant intergenerational differences in life style and emotional needs are likely to enhance the generational divide over time (Amarabandu 2004). Studies on the living arrangements of elderly in Sri Lanka show that those co-residing with a spouse or children appear to be the common living arrangement (World Bank 2008; Siddhisena 2005; NSE 2004; Marga Institute 1998; Uhlenberg 1996; Nugegoda and Balasuriya 1995; Andrews and Hennink 1992). Although, elderly parents in Sri Lanka are willing to co-reside with their children, some argue that current social, economic and demographic changes will prevent them doing so in the future (World Bank 2008; Siddhisena 2005; Uhlenberg 1996). Gradually, the trend of the elderly living alone is

increasing due to many changes that have occurred in relation to family roles (World Bank 2008; Siddhisena 2005; NSE 2004).

Empirical findings on the changing role of the family and ageing population in Sri Lanka are very limited. Few scholars have paid attention on this important topic and showed interest in research on the topic. The only study which has focused on the intergenerational transfers is the World Bank Study in 2008. Although this study examined different familial support from adult children to elderly parents, the support from the elderly parents to adult children has not been examined in detail. However, it also failed to examine the ‘economic transfers’, ‘non-economic transfers’, ‘public and non-family transfers’ which are very relevant to support systems available for the elderly in developing countries. A number of studies in several Asian countries as reviewed above, show that elderly are not the only support recipients but also provide substantial support to their adult children and their families (Pfau and Giang 2009; Giang and Pfau 2007; Schroder-Butterfill 2003). Therefore, this study on the relationship between the changing role of the family and ageing in Sri Lanka will provide a unique opportunity to fill this gap in the literature by analysing the effects of changing intergenerational relationships/transfer of wealth on the well-being of elderly in Sri Lanka.

## **1.6 Organisation of the Thesis**

This thesis consists of nine chapters. Chapter one is a brief introduction to the rationale of the study, study objectives and relevant research questions. It further presents the demographic, social and economic situation of Sri Lanka and a literature review to illustrate the significance of the study in the Sri Lankan context. Chapter two outlines the theoretical framework of the study which is directed towards understanding the relationship between the changing role of the family and ageing populations in developing societies, with specific reference to Sri Lanka. In this chapter, theories on the family change, ageing, and intergenerational relationships/transfer of wealth between generations are reviewed to differentiate and identify the most appropriate conceptual framework. Chapter three presents the data sources and methodology utilised in this study in order to answer research questions.

Chapters four and five primarily use secondary data gathered through various sources to demonstrate the process and rapidity of population ageing in Sri Lanka and the nature, and trend of family change and its functioning. Chapters six, seven and eight are major analytical chapters based largely on primary data. Chapter six examines the factors that are influencing living arrangement of elderly which include patterns of living arrangement together with institutionalised elderly, demographic socio-economic factors affecting living arrangements and migration and living arrangements. Chapter seven examines the transition of the wealth flows from the traditional to modern society by discussing variation of wealth transfers between traditional and modern society. Chapter eight examines the current net intergenerational transfer of wealth between elderly parents and adult children and then focuses upon the well-being of the elderly in different living arrangement types.

Chapter nine is the concluding chapter it assesses whether the study objectives have been appropriately achieved and summarises the main findings of the study. Most importantly, this chapter offers theoretical, methodological and policy implications and draws attention to future research directions. The study concludes by providing a new conceptualisation to understand the changing role of the family, especially the impact of the changing intergenerational role of the family on the well-being of the elderly population in Sri Lanka, which will be applicable to developing nations.

## **1.7 Conclusion**

This chapter sets the background for the study by specifying the significance of the study of population ageing in Sri Lanka in the context of its changing demography towards an older age of the population. In this regard, the study of the relationship between changing role of the family and ageing population in Sri Lanka is imperative because of the rapid ageing process observed in recent decades, as well as the changing nature of the family experienced during the immediate pre-transitional fertility regime. Being a developing country, it is interesting to investigate how Sri Lanka will encounter issues that can emerge from population ageing in the context of diminishing family support due to the establishment of more and more nuclear families. The next chapter reviews the existing theories related to population ageing and family change which can be used to elucidate the relationship between the changing role of the family and ageing population in Sri Lanka.



## CHAPTER 2

### **THEORETICAL FRAMEWORK:** *Understanding the relationship between the changing role of the family and ageing in developing societies*

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#### **2.1 Introduction**

This chapter endeavours to build a robust theoretical underpinning to explain the relationship between the changing role of family and ageing in Sri Lanka. Therefore, it concentrates on how the study is placed within a theoretical framework by exploring appropriate theories which clarify this relationship. However, existing literature advocates that there is inadequate work on issues of ageing, predominantly explaining the mechanisms causal to the relationship between ageing and the changing role of the family in developing societies (Marshall and Mueller 2003; Bengtson *et al.* 1997; Passuth and Bengtson 1988; Maddox and Wiley 1976; Orbach 1974). Additionally, there exists a widely held declaration that gerontology is “data-rich but theory-poor” (Bengtson *et al.* 2009, p. xxi). Conventionally, demographic research on population ageing has concentrated on factors affecting the growth of the elderly population, primarily on fertility and mortality declines and comparing countries that are influenced by similar change. Such single-mindedness disregards how structural variations in the family unit and how the role of the family has made a noteworthy impact on the onset of the fertility transition in developing countries and the effects on age-sex structure of populations which lead to population ageing. These variations create a considerable impression on socio-economic, health and other cultural behaviours of the ageing population. Therefore, the lack of conformity in theoretical paradigms or perspectives on ageing has been deemed as a result of the undue focus on age-sex structural fluctuations of populations (Marshall and Bengtson 2011, p. 1).

In this context, it is therefore, to a certain extent, rational to claim of an insufficiency in the theories which directly focus upon family change and ageing. This area presently warrants greater attention, especially in developing countries, such as Sri Lanka, where changes in both the growing number of aged and the changing role of the family is occurring in an unprecedented manner.

## **2.2 Population Ageing: Demographic Perspective**

### **2.2.1 Classical Demographic Transition Theory**

Since the focus of this study is to explore theoretical explanations of the relationships between the changing role of the family and ageing population, it is important to examine the extent to which classical demographic transition theory provides such an elucidation. The main objective of the classical demographic transition theory was to explain the fertility transition. It has not directly focused upon family change and population ageing. However, the demographic transition theory has been recognised as, “one of the best-documented generalisation in the social sciences” (Kirk 1996, p. 361), is the principal framework for considering temporal trends in ageing and its main immediate causes, namely changes in fertility and mortality rates (Uhlenberg 2009, p. 37-38). When the demographic transition theory is looked at by relating the population ageing process of a country, Uhlenberg (2009, p.28) claims,

“the demographic transition ..... fails to reveal the diversity in the experience of national population ageing and creates unrealistic expectations that ageing evokes similar issues and responses in different societies”.

However, population ageing arises from a sustained decline in fertility. Hence the extent to which the changing nature of family is an influential factor in fertility decline clarifies that it also has a significant impact on population ageing. Therefore, it is worthwhile to investigate the extent to which classical demographic transition theory is involved in the changing nature of family and its causal factors. When presenting classical demographic transition theory, (Notestein 1945) proposed that the mode of production of the family is the principal element within the traditional family. It further states that all family members have little mobility outside the family and thus exclusively contribute to the family’s economy. Womens’ functions are mainly related to the role of wife and mother within the family while children begin their economic contribution to the family early in their life. Notestein (1953, p. 142) stated that,

“The economic organisation of relatively self-sufficient agrarian communities turns almost wholly upon the family, and the perpetuation of the family is the main guarantee of support and elemental security. Children begin their economic contributions early in life. In such societies, moreover, there is scant opportunity for women to achieve either economic support or personal prestige outside the roles of wife and mother, and women’s economic functions are organised in ways that are compatible with continuous childbearing”.

According to Notestein (1945) the demographic transition is associated with the onset of modernisation enhancements in living conditions and the control of diseases. Social and economic changes referred to modernisation, have influenced such demographic changes in society (Notestein 1945, p.40-41). Notestein further argued that the traditional family lost its base mainly due to the emergence of the urban industrial society in which health, education and material welfare of the individual child was promoted above all else. Notestein (1945, p. 16), further accentuated that the 'urban industrial society' is an essential element to commence demographic transition and erosion of the traditional family, "particularly the extended family," and on the growth of individualism and other social movements. Notestein (1953) argues that with the modernisation process, and economic development there is a shift from the traditional large family which is centred on the family economy to a small family which is characterised by the functions of urban industrial society. In the latter, youth acquire independence as a result of new mobility and reduced pressure from the family and community. Classical demographic transition theory has described the changes taking place in the family and its roles through the modernisation process but, the fact that it claims rational behaviour takes place only in urban industrial society has been criticised by subsequent writers (Kirk 1996; Dissanayake 1995; Caldwell 1982). The process of modernisation and its effects on the family is useful to understand the factors that influence the role of family members in the modernised setting. Although Sri Lanka was not subjected to an industrialisation process, Sri Lanka started to move away from its traditional extended family structure in which the family economy was the mode of production, to a modern nuclear family structure in which the mode of production was the capitalist economy during the pre-transition fertility regime (Dissanayake 1995).

Therefore, the changing nature of the family described by the demographic transition can be still relevant to this study when studying the factors underlying the changing role of the family members in both extended and nuclear family settings.

### **2.2.2 Epidemiological Transition Theory**

Epidemiological transition theory is appreciated in understanding the population ageing process and associated health concerns. The health concerns ascending from alterations in age structure increasing in favour of the ageing populations are more associated with

degenerative or non-communicable diseases. Incidentally, it is more pertinent to the current study to examine how families in a developing country like Sri Lanka solve health issues of elderly members. Furthermore, it can be noted that the health of the elderly is related to their living arrangements for the reason that living alone or living with relatives may depend on their health status and age. This is investigated in more detail and analysed in chapter 8. In this regard, the positioning of Sri Lanka in stage of the epidemiological transition is imperative to this study as it will enable the researcher to understand the magnitude of the relationship between ageing and the extent of non-communicable disease. This will therefore provide an inimitable opportunity for policy makers to comprehend how resources can be mobilised to address health issues of the elderly especially in the context of non-communicable diseases and the growing elderly populations.

Epidemiological transition theory focuses on the multifaceted fluctuations in health and disease patterns in terms of their economic, a demographic and sociologic implications (Omran 1983; Omran 1971). Sri Lanka has experienced demographic transition leading to an accelerated ageing population and an epidemiological transition. Dissanayake (2000a) identifies Sri Lanka in the stage of degenerative and man-made diseases where focus should be on the elderly and their need for healthcare systems that can cater to higher or extended levels. Therefore, examination of the interacting transitional variables, which influence socio-economic and psychological factors on changing family structure, are important because they have been regarded as the main driving force behind the epidemiological transition that leads to improved life expectancy of populations (Omran 1971, p. 165).

Although the theory does not focus upon the impact of changing family structure on ageing population, it shows that the interrelationship occurred due to social, economic and technological developments which can have a significant impact on ageing population.

“Not only are compensatory efforts to ‘ make up’ for lost children reduced, but the investment of parental energies and emotions may take on a new, qualitative dimension as each child in the small family is provided better protection, care and education” (Omran 1971,p. 165-166).

The epidemiological transition occurs when infectious and parasitic diseases are replaced by degenerative and man-made diseases. Patterns in mortality point towards a reduction in deaths as a consequent from diseases of the sense organs, nervous system, respiratory system, infectious and parasitic diseases (Omran 1983). Furthermore, there exists a considerable rise in mortality rates linked with circulatory related diseases, injury and poisoning (Ministry of Health 2003, p. 30). Therefore, it can also be seen that there is a rise in chronic ailments of the heart/stroke and cancer are three main types of morbidity. Chronic diseases also encompass recurrent medical treatment for example arthritis, kidney diseases, diabetes, allergies and obesity. Accidents resulting from traffic related accidents and sicknesses and those related to high levels of stress and mental illness, drug dependency, peptic ulcers, suicide tendencies also increase over time (Dissanayake 2000a).

The above discussion suggests that health issues of the ageing population can be better understood by using epidemiologic transition theory which explains the changing disease patterns from infectious to chronic degenerative diseases. Hence, future scenarios can be predicted using experiences of other countries. These scenarios are important to this study because it explores the health issues of the elderly and their living arrangements, family members' responses to the health issues of the elderly and health care provisions made by governmental and non-governmental organisations. However, it is important to note here that the theory of epidemiological transition assists in an understanding of the health and disease pattern of the elderly population in Sri Lanka but it doesn't provide insights into how the role of the changing family can be linked to health issues of the elderly population.

## **2.3 Theories of Population Ageing**

This section reviews various ageing theories in order to find whether they provide any explanation for the relationship between the changing role of the family and population ageing. In general, ageing theories can be regarded as explanations or systematic statements which provide generalisations about causal relationship between population ageing and various other explanatory variables, and hence paid their attention to diverse areas of the ageing process (Marshall and Bengtson 2011). For example, some have examined different areas of ageing, such as a general overview of ageing (Macmillan

2005; Marshall and Mueller 2003); life course perspectives of ageing (Bengtson and Putney 2012); demography and its relationship with life course stages (Hogan and Goldscheider 2003); and relationships between families and ageing (Bengtson and Allen 1993).

### **2.3.1 Functionalism Perspective**

Functionalists analyse how different groups of society function together (Openstax 2013; Palmore and Harris 2005). It is important to find how this perspective addresses ageing, and whether it will be useful for this study since it examines two population groups: the elderly and their adult children. Activity theory, disengagement theory, and continuity theory are social theories that are part of the functional perspective (Openstax 2013).

*The disengagement theory* states that the process of ageing is unavoidable, where elderly tend to reduce interaction with people within their sphere of interaction and social circles (Cumming and Henry 1961, p. 227). This theory demonstrates that it is normal and tolerable for aged individuals to remove themselves from society. The disengagement theory is a major psychosocial theory which explains how people develop in their old age (Openstax 2013). Further, this theory stresses how the aged have worn out their functional capacity in society (Palmore and Harris 2005). Therefore, people move away from production promoting activities to leisure activities when they become old. Consequently the elderly recognise their limitations in their behaviours. This theory examines whether elderly people in a country like Sri Lanka, where a substantial proportion of current elderly young-old, are still engaged in productive activities even after the age of 60 or do they withdraw from such productive work. Information has been gathered on both previous and current employment activities of the elderly, and the analysis will provide a unique opportunity to test the hypothesis put forward by the disengagement theory, that aged persons have worn out their functional capacity in society, and whether such an assumption is true in developing societies where there is still a significant proportion of people engaged in farming and informal sector activities.

According to the disengagement theory, extracting oneself from society and its societal associations is an expected part of ageing (Cumming and Henry 1961). This theory has offered various aspects that are significant in clarifying how and why the aged population separate themselves from their purposeful roles of the social order. Traditionally, men have focused on financial employment and women on marriage and family, and when they extract themselves from society, they tend to be depressed and directionless up until they assume a role which substitutes their habitual role and one that is well-matched with the detached state (Cumming and Henry 1961).

The main criticisms, against disengagement theory is firstly, older people may move into new roles of prestige and power rather than completely disengage from their previous functional roles and become powerless; secondly, there are a growing number of older people that remain employed, healthy and socially active and thirdly, the theory fails to account for variability in individual preferences, for personality and for differences in socio-cultural setting and environmental opportunities (Victor 2004; Hendricks 1994).

The theory and its criticisms seem useful here because the focus is upon the functional roles of the elderly in different living arrangements. Therefore, the research to test whether the previous status or power of the elderly differs according to different living arrangements and whether a growing number of elderly remain employed, and if so are they healthy and socially active. Most importantly the reasons for such status and behaviours are examined.

*The continuity theory* explores the complexities of the ageing process within a holistic framework (Neugarten 1964). It claims that young peoples' current behaviours are positioning the groundwork for their personal impending future at old age. Further, it suggests that ageing is a product of a lifetime of personal choices (Atchley 1989). The continuity theory holds the view that the elderly make specific choices to preserve consistency in internal (personality structure, beliefs) and external structures (relationships), remaining active and involved over their older years (Openstax 2013). This is an effort to uphold social equilibrium and stability by making future decisions on the basis of previously developed social roles (Atchley 1989, p. 183). One major criticism of this theory is its emphasis on so-called "normal" ageing, which marginalises those with chronic diseases (Openstax 2013).

This study collects information from the adult children of the elderly who are below 60 years of age on various aspects of ageing and the intergenerational transfer of wealth. As indicated by the continuity theory, this study can examine if their existing behaviours are positioning the groundwork for their personal impending elderly years. Therefore, whether older or middle aged adults endeavour to maintain prevailing external and internal structures can be tested, and their inclination to achieve this objective utilising methods which are linked to their past know how and capabilities can also be linked to their societal sphere.

*The activity theory* is also known as the implicit theory of ageing, normal theory of ageing and lay theory of ageing (Loue and Sajatovic 2007). According to this theory, activity levels and social connections are key to this progression and key to happiness (Neugarten 1964; Havighurst 1961). This theory suggests that successful ageing occurs when older adults stay active and maintain social interactions (Richard 2006). This concept arose as a counter to the concept of disengagement and therefore adopts a constructive association between life satisfaction (Havighurst 1961) and individual's activity (Havighurst 1961). Ekerdt (1986, p. 240) suggests that activity enables older adults to adjust to retirement and is called "the busy ethic". This theory is founded on the assumption that energetic elderly are happier and better than people who are not as active. This idea also postulates people who build ideas about themselves have a tendency to use two foremost sources: roles which they fill in life and the things that they do (Ekerdt 1986, p. 240). Furthermore, people give up many roles as they age such as retirement from work, drop out of professional and other organisations, leave clubs and unions become widows and widowers etc. (Kossuth and Bengtson 1988).

Criticisms for this school of thought tend to focus on equal rights of entry to social prospects and the ability to be active in these ways is always not the same for every person (Openstax 2013). Furthermore, not everyone discovers fulfilment in the presence of others or participation in activities (Lemon *et al.* 1972). Furthermore, it ignores inequalities in health and economics that hinders the ability of older people to actively engage in activities (Bengtson *et al.* 2009). Although the acceptance of the activity theory has diminished over the years, it is however, still used as a standard to compare observed activity and life satisfaction patterns.



This study finds the theory useful when examining the living arrangements of the elderly and their active engagement in individual, family and social activities. However, as the critics suggest, the active engagement of the elderly will be examined according to their health status, as well as economic status.

### **2.3.2 Conflict Perspective**

Theorists who propose the conflict perspective observe society as fundamentally unsteady, and as an establishment which benefits the influential affluent minority at the same time relegating the rest of the population (Openstax 2013). According to the conflict perspective, social groups compete with each other for power and insufficient resources (Cowgill and Holmes 1972). When this perspective is applied to ageing populations, the elderly struggle with other groups, such as younger society members, to retain a certain share of resources. In this way, at some point, this competition may become conflict. This perspective is useful for this study to examine whether different living arrangements of the elderly are emanating from such conflict between elderly and their adult children. The conditions in which such conflicts arise between parents and children will also be examined. In this respect modernisation theory and exchange theory which seem more relevant to this study and are reviewed accordingly.

Academics looking at the conflict standpoint discover society is continuously unbalanced because a minor number of affluent are privileged whereas others are marginalised (Dowd 1975; Cowgill and Holmes 1972; Riley *et al.* 1972). The fundamental perspective of conflict theory details the idea of various groups within society are competing with each other for limited resources power and control. This perspective is useful to establish whether the elderly population will get more than their fair share of society's resources. This aspect is investigated by examining the healthcare costs and social security expenditure of the elderly.

Among the theories which come under the conflict perspective, the modernisation theory (Cowgill and Holmes 1972) seems more relevant for this study because it addresses the main cause of the elderly losing power and influence in society, which are the corresponding forces of industrialisation and modernisation. As societies modernise,

the status of the elderly decrease and there is a greater tendency for them to experience social exclusion. (Cowgill 1974, p. 127) claims,

“The transformation of a total society from a relatively rural way of life based on animate power, limited technology, relatively undifferentiated institutions, parochial and traditional outlook and values, toward a predominantly urban way of life, based on inanimate sources of power, highly differentiated institutions, matched by segmented individual roles, and a cosmopolitan outlook which emphasises efficiency and progress”.

According to Cowgill and Holmes (1972) prior to industrialisation, strong social norms bound the younger generation to care for the older generation. However, when societies industrialise, the nuclear family replaces the extended family (Harper 2006). In this context, societies become increasingly individualistic, and norms concerning the care of older people also modify (Gary 1994). In such a society, caring for the elderly can be seen as a voluntary obligation that can be ignored without fear of social pressure (Openstax 2013). Although Sri Lanka did not undergo an industrialisation process as in the West, it has experienced a significant change in the type and nature of the family whereby the extended family system that prevailed in the society has moved into more nuclear family types over the last two decades. Therefore, the central reasoning of modernisation theory which is that the extended family is the standard family, and elders have a place in that pre-industrial society, seems very valid for this study when analysing the changing role of the family in Sri Lanka. It has been stated that modernisation has generated widespread alterations in the traditional extended family system, and these alterations have had a negative impact on the support and well-being of the elderly population (Mba 2013). The question of whether the elderly in Sri Lanka are unable to work outside of the home and have less to offer economically is a focus of attention. This phenomenon is investigated in this study to establish whether as people age they will be abandoned and lose much of their familial support if they become a non-productive economic burden on the family.

Another classical theory of ageing within the conflict perspective is *exchange theory* (Openstax 2013). The basic premise of the exchange theory is to provide an explanation to understand human behaviour or social interaction as an exchange of activity, tangible and intangible (Homans 1961), particularly in relation to rewards and costs (Homans 1961, p. 317-18). This concept elucidates how definite dynamics affect dealings and associations amongst care-giver and the recipient. According to the exchange theory,

the relationship between the care-giver and care-recipient depends on the capacity of these two categories of people to mutually reward one another (Emerson 1972). Further, it suggests that if one party has a lower capacity to reward the other party in the relationship, then the party with less capacity of exchange of the resources is assumed to be more dependent in the relationship (Homans 1961).

Dowd (1975) utilised the exchange theory to argue how ageing affects the relationship between care-giver and care-recipient in order for the two categories to benefit from social interaction with each other. The ability to receive benefits from exchanges depends on the resources that each group brings to the exchange. If resources are similar, then a mutually satisfying interdependence can emerge. However, if one group has substantially fewer exchange resources, then their ability to profit from the exchange can be restricted. Using this model, it is possible to identify how different groups endeavour to capitalise on achievable rewards and reduce costs during interactions amongst the groups (Walker *et al.* 1992). If the exchange relationship becomes increasingly unbalanced, then unstable relationships may emerge (Durant and Christian 2007). One of the most common patterns of exchange relationships within family relationships can be the exchange of the resources between adult children (care-giver) and ageing parents (care-recipients) (Durant and Christian 2007). Therefore, exchange relationships among family members can be seen at different intervals over the life course of both adult children and elderly parents (Hareven 1996; Elder 1977). This procedure could be subject to numerous causes, similar to social class, health, ethnicity, accessibility to resources, residence, gender, personality, period of the relationship, stability and strength of the rapport among the care-receiver and giver (Calasanti 1999; Arber 1995; Osmond and Throne 1993).

The exchange theory can be useful when analysing the intergenerational transfer of wealth in this study, because the exchange theory provides an explanation about the type of relationship that can exist between care-giver and care-recipient in terms of the transfer of resources between the two groups (Dowd 1975). Traditionally, parents and children engage in mutually supportive exchange patterns (Mancini and Blieszner 1989). The traditional norm of faithfulness has been the principle guiding the intergenerational relations which leads the adult children to support ageing parents with co-residence and by providing financial support (Yi and Lin 2009; Yeh 1997), which

makes adult children as care-givers while the elderly parents as care-recipients. However, it may not be the case always because of the availability of resources and the living arrangement of the elderly (Lin and Yi 2011). Therefore, the viewpoint put forward by the exchange theory is one that states the ability to obtain advantages from exchanges rests on the exchange of the assets which every group provides to the exchange, may perhaps be valuable for the current research while investigating the intergenerational transfer of wealth to further identify the methods by which particular groups endeavour to capitalise on benefits and reduce expenses during collaborations with one another.

## **2.4 Theories on the Changing Role of the Family**

The following section reviews the theories that explain the changing role of the family in order to understand how it has changed over time and what are the influential factors.

*Life course paradigm* has become very important in recent years when micro-level demographic data are analysed in order to trace longitudinal experiences of population groups. It thus provides a necessary dimension and an integrating framework for the study of intergenerational relations because it is both developmental and historical (Hareven 1994, p. 438). This approach helps to evaluate how families form and how their interests are met throughout the life of individuals leading to a view throughout generations. This method provides a context to study occurrences at interconnecting social routes and correlates those with routes of development data to identify the social change and development idiosyncrasies (Elder *et al.* 2003, p. 10). This approach is useful since the life course approach can reveal the interactions and intersections between the micro level of individuals and the macro levels of culture, economy, and social policy and so on. Life course analysis is centred on five basic principles (Elders *et al.* 2003, p. 1).

- First, it suggests that the life course is a cumulative process and should therefore be studied as a whole. This can be important for the present study because it directs us to examine the various aspects of elderly throughout their life course in terms of their education, marriage, employment, number of children, investment in children and health and relate those with their present status;
- Second, it acknowledges that people determine their life course within given constraints and opportunities (Hareven 1994, 1982). In this study, information from the elderly was collected as well as adult children about the opportunities

available to them and the constraints that they faced during their life course. For example, living arrangements can be seen as an opportunity available to the elderly because of their economic independence or their investment in children;

- Third, is that individuals and birth cohorts are subject to historical context and specific location. This method is looking at relations amongst life courses and economic, institutional, demographic, and cultural changes. This study examines the attitudes towards ageing with the changes occurring to family roles in relation to demographic, economic, institutional and cultural changes;
- Fourth, the life course analysis suggests that the influence of personal experiences and past proceedings on the successive life course is subjected to a great extent of the timing of the same. For example, various factors are examined that influence the onset of the population ageing in Sri Lanka. Furthermore, a particular emphasis is given to establish a link between the changes occurring in the family roles and population ageing by considering the interaction of the time of the individual (age), of the family (stage in the family cycle) and historical time (economic cycles, social changes); and
- Fifth, principle stresses that life courses are interdependent with others. This is mainly relevant in the context of families (Kok 2007, p. 205). For example, transitions of some members of the family such as moving out of their residential home have instantaneous implications for the remaining members. When considering the Sri Lankan situation, changes occurring to the nature of family are examined in Chapter 5 in terms of its changing composition.

The life course approach proposes that such changes can have a significant impact on the internal processes of family decision making (Hareven and Trepagnier 2000; Modell and Harveren 1978). Therefore, the changing nature of the family from extended to nuclear can have a significant impact on the decision of living arrangements of the elderly, as well as the transfer of wealth between generations. Marshall and Bengtson (2011, p. 25) claims,

“Although many aspects of the life course perspective are useful in theorising family processes, the concept of “linked lives” has proven the most useful tool in understanding the actions and interaction of family members over time”.

The concept of linked lives in relation to elderly parents expands beyond the boundaries of the nuclear family (Bengtson *et al.* 2002). The elderly extend their support to their adult children in various ways such as mentoring grandchildren (Mueller *et al.* 2002), conveying values and moral teaching as well as family identity to younger children (King 2003) and influencing religious obligations (Bengtson *et al.* 2009). However, the primary responsibility for providing care and support for dependent elderly parents remains with the family (Bengtson and Lowenstein 2003).

Bowen's *family systems theory* is a theory of human behaviour which regards the family as an emotional unit and uses the systems to explain the complex interactions in that unit (Bowen 1966; Kerr 1988). It has been shown that the family is a structure of related parts or systems and each action or change affects every other person in the life cycle (Bowen 1966). Bowen's framework has been later expanded by incorporating the family life cycle (McDaniel 1990). During the family life cycle, the vertical flow of concerns and the horizontal flow of concerns (Bowen 1966), have been considered as important aspects. Therefore, this theory is useful when analysing emotional aspects of intergenerational transfers to see whether they maintain vertical anxiety between generations which is a salient aspect of determining the well-being of elderly population (World Bank 1994).

Nonetheless, this study has collected information on moral attachments of parents and children during their life course, which is useful to establish how parents and children emotionally support each other. Family members are emotionally connected and that is the general nature. This study examines whether the type of living arrangements of the elderly make the elderly parents distant or disconnected from their families, or otherwise. The family systems theory further explains how adjustments in an individual's activities can be predicted to create similar changes in the behaviours and mannerisms of others that are influenced by them (Kerr 1988; Bowen 1966). This suggests that families differ somewhat in the degree of interdependence. The emotional interdependence presumably evolved to promote the cohesiveness and cooperation families requires them to protect, shelter, and feed their members (Kerr 1988, p. 97-98). This aspect is very important to examine how far Sri Lankan elderly parents and their adult children are interdependent and whether changes in the family roles can have any significant impact on this interdependence when family is moving away from the extended to nuclear family type.

## **2.5 Perspectives on Intergenerational Transfers/Relationships**

Intergenerational relationships were first discussed in demography by Caldwell (1982) when he presented his famous wealth flow theory of fertility decline. His intention was to explain the onset of the fertility transition in terms of net flow of wealth between less-educated parents and their educated children. He claimed that wealth flow is

upward from children to parents in family economies where children are regarded as present producers while it is downward in capitalist economies where children become future producers (Caldwell 1982). However, Caldwell's main intention was to describe the relationship between mass education and its influence on the onset of the fertility transition by showing the changes occurring in the direction of the net wealth flow<sup>8</sup> in intergenerational transfers. Caldwell (1982, p. 139) claims,

“The wealth flows theory also assumes that parents expect to receive economic benefit from their children during old age”.

The concept of intergenerational relationships has acquired a dominant place in the field of gerontology during the past few decades. Some argue, however, that intergenerational relations studies became prominent with the emergence of the concept of social ageing, as well as with the establishment of gerontology as a discipline in the 1940s (Verma and Satayanarayana 2012). This suggests that the concept of intergenerational transfers has a long history although it is somewhat new to the field of demography.

When reviewing the literature on intergenerational transfers (Mason *et al.* 2006; Kreager, Philip and Schröder-Butterfill 2008; Schroder-Butterfill 2003; Lee *et al.* 1994; Caldwell 1982), it is clear that the central dimension of the intergenerational transfers is the distribution or redistribution of resources between two generations, basically between parents and their children. It has been shown that,

“ familial Transfer of wealth includes net support that the elderly expect from their adult children: bequests that the adult children expect from their elderly parents and child rearing costs that parents expect their children to bear when they become parents themselves” ( Lee 1994, p. 1028).

Some argue that the population ageing process has made a significant change in the direction of the intergenerational transfer of wealth between elderly parents and their adult children (Schroder-Butterfill 2003). In the Asian context, the usual assumption has been that adult children take care of their elderly parents (Knodel and Chayovan 2008). Nevertheless, some argue that this may not always be the case with the example from various countries in Asia (Schroder-Butterfill 2003). Such studies show that a

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<sup>8</sup> Wealth flows are defined as all the money, goods, and services and guarantees that one person provides to another. The term “wealth” was used instead of “income” so as to emphasise the fact that the transactions were not all monetary; indeed at any given time they were not all material (Caldwell 1982, p. 333).

significant proportion of elderly parents still support their adult children even after their marriage in various ways. Schroder-Butterfill (2003, p. 27) further argues that,

“The elderly are not a ‘burden’, but they are often vital to the survival and welfare of their families”.

The interest around intergenerational relations emerged strongly after the 1990s (Verma and Satayanarayana 2012). Some attempted to explain differences of values, need, lifestyle, attitude and financial status that lead to conflict between older and younger generations (Lee *et al.* 2000; Laursen *et al.* 1998; Fengler and Wood 1972). Nonetheless, some researchers have shown power, resources, justice and social identity as sources of conflict (Sherif 1958; Simmel 1950). Furthermore, greater autonomy, independence and personal identity were also regarded as sources of conflict between generations (Fuligni 1998; Laursen *et al.* 1998). In addition, some claimed that the cultural gap, such as parenting style as a major cause of intergenerational conflict (Laursen and Collins 1994). These suggest that intergenerational relations can also be studied in a conflict perspective. Therefore, it is important to explore whether intergenerational relations can be addressed with the use of sources of conflict as indicated by the various writers above.

Intergenerational relations also can be examined from the solidarity perspective (Yi and Lin 2009; Bawin-Legros 2002; Bengtson *et al.* 2002), because that intergenerational relations can also be explained by the positive association between generations arising from norms of reciprocity and their acceptance and practice in accordance to individual need and social support/financial support, complimentary of role expectation based relations among family members. Bengtson and Schrader (1982) proposed a very attractive mode of intergenerational family solidarity which has been widely used (Yi and Lin 2009; Bengtson and Roberts 1991; McChesney and Bengtson 1988). This consists of six elements: intergenerational structure, association, affects consensus, function, and norms. These six dimensions may overlap but nonetheless represent the multi-dimensional nature of intergenerational relations (Verma and Satayanarayana 2013; Teo *et al.* 2003; Connidis and McMullin 2002, p. 560 ). This study has also used this perspective in order to examine the intergenerational relations between elderly and their adult children generation because those six elements have the ability to describe the existing diversity between the generations.



Hogan *et al.* (1993) have utilised the *latent class analysis*<sup>9</sup> to examine the arrangement of exchanges within generations. They showed how exchange patterns can be derived by distinguishing between the receiving and the giving of assistance, care, advice and money between generations. It was found that latent class analysis is a practicable tool to generate a range of relations when different solidarity indices are employed (Van Gaalen and Dykstra 2006; Park *et al.* 2005; Silverstein and Bengtson 1997; Hogan *et al.* 1993). Hogan *et al.* (1993) found four basic categories (low exchanges, high exchanges, children give more, children receive more) to study intergenerational relations which appear to be very relevant here. However, Silverstein and Bengtson (1997) suggested an improved concept of intergenerational solidarity with the inclusion of more comprehensive intergenerational aspects. They attempted to refute the thesis of family decline (Popenoe 1993) and accept the concept of "modified extended family" (Litwak 1960), which shows that mutual help between generations is likely to occur when the need is present, irrespective of the residential status. This can be tested here to find whether co-residence of the elderly has any impact on the intergenerational relations between the elderly and their adult children generation. The idea is very similar to the ambivalence thesis, which opposes the fact that ambiguity is prevalent amongst interactions between generations (Connidis and McMullin 2002).

All types of intergenerational relations discussed above permit an overall pattern of the family dynamic between generations to be derived, which is one of the important components in this analysis, which has not been systematically examined in Sri Lanka. This study expects to first investigate the types of intergeneration relations in the Sri Lankan family by inclusion of various solidarity aspects drawing from previous studies. Secondly, different methods that are in place and those that are related to the means and requirements of both age groups will be analysed in the viewpoint of how they affect those relations. This will provide insight into how to expose configurations and patterns in the interactions between generations. In this regard, basically the types of intergenerational relations between elderly and their adult children will be examined in the context of the decline of extended families and whether living arrangements of the elderly make a significant difference in intergenerational relations.

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<sup>9</sup> 'Latent Class Analysis (LCA) is a statistical method for identifying unmeasured class membership among subjects using categorical and/or continuous observed variables' (<http://www.ats.ucla.edu/stat/mplus/seminars/lca/>).

The availability of micro-level studies has tremendously contributed to advance understanding about the measurement of familial transfers and to study reason for their occurrence (Frankenberg *et al.* 2002; Lillard and Willis 1997; McGarry Kathleen and Schoeni 1997; Altonji *et al.* 1996). This study is also interested in the familial transfers and why they occur in Sri Lanka. Familial transfers are almost universally the main source of resources for children. It has been shown that familial transfers to the elderly can have an intense effect on intergenerational equity (Mason *et al.* 2006). In Sri Lanka, it has been found that changes in both structure and the type of family have produced a substantive proportion of elderly parents living alone in addition to the co-residence with children (Chapter 6). However, cultural attachment forces many to accept the norm that it is the childrens' responsibility to provide old age surety for their elderly parents (Amarabandu 2004; Silva 2004). It is often assumed that the great majority of elderly live with their children, and there is a strong degree of stability in these arrangements. The intention here is to test this hypothesis and hence, the experiences gathered in other settings with similar studies are important. Further a wide-ranging methodology to intergenerational transfers is required to solve many vital issues. It has been claimed that the scheme of transfers between generations is related to existing research pertaining to the demographic dividend (Mason *et al.* 2006). It is a well-known fact that the first demographic dividend fades away when the share of the elderly population rises and there is a consequent decline in the share of the working age population (Dissanayake 2013). However, higher rates of saving and capital intensification may be achieved within the economy, if capital gathering as opposed to family based or public transfer initiatives, are used to dominate age based reorganisation structures for the support of the elderly. This may further result in population ageing yielding a second demographic dividend (Mason 2005). Furthermore, some showed that if ageing is accompanied by a shift away from transfer systems, the effects on capital accumulation may be particularly distinct (Lee *et al.* 2003).

Moreover, when the above claims, are simplified the changes in population age structure can produce a second demographic dividend that depends on how the accumulation of wealth is connected to population ageing. According to Mason (2005), first, there are compositional effects, however, during the later stages of the transition to low fertility, a rising share of the population consists of individuals who are approaching the completion or who have concluded their productive years. These

individuals must have accumulated wealth with the intention of financing consumption in excess of labour income for many of their remaining years. Second, there are behavioural effects, with the increase in life expectancy and the associated increase in the duration of retirement there can be a shift in the age-profile of wealth. However, this wealth can take different shapes (Gary 1994). One option is that retirees will rely on transfers from a public pension and welfare programmes or from adult children and other family members, like in many developing countries including Sri Lanka. In this context, individuals are accumulating wealth as a method of financing consumption during their retirement years. A second possibility is that individuals will accumulate capital during their working years and that this will serve as the source of support during the retirement period. Both types of wealth can be used to deal with the life cycle deficit at older ages. This leads us to test the hypothesis that whether the adult children still support their elderly parents in Sri Lanka, or the elderly parents who have accumulated wealth and thus became richer than their children still support their adult children who are economically independent or not.

When searching for literature on intergenerational transfers, it was found that there are substantial generational inequities and they are changing over time (Becker and Murphy 1988; Preston 1984). These inequities in terms of social economic aspects, and whether there has been any change in those aspects over time, can be related to the changing role of the family. However, it can be argued that the size and path of transfers mirror the political power the elderly have in relation to the younger generations (Razin *et al.* 2001; Preston 1984). Data has been collected on the decision making power of the elderly in different living arrangements and this study provides a unique opportunity to understand whether the changing role of the family allows the elderly to retain their political power within their families and how it differs by type of living arrangement.

Some research focuses upon the effects of intergenerational transfers on savings, economic growth, and equity (Gale 1998; Feldstein 1974; Munnell 1974). These studies evaluate existing transfer systems. They also anticipate the implications of alternative reform proposals. In this regard, social security reform has been the subject of a massive amount of research (Feldstein and Samwick 2001). Although this study will be examining the volume of savings of the elderly at a micro-level situation, it will not explore how such savings can contribute to economic growth and equity of the population at the macro-level since it is beyond the scope of this thesis. However, there

is an intention to explore the policy implications of alternative public transfers by examining the adequacy of the familial intergenerational transfers in relation to the health and well-being of the elderly.

What is lacking in most studies that investigate intergenerational transfers is the non-economic transfers between the elderly parents and their children. In this respect, Caldwell's wealth flow definition is important because it accommodates non-economic wealth flow between parents and children. It is suggested that in the Asian context including Sri Lanka, those care in non-economic terms such as moral support, healthcare, care for grand-children, securing safety of the property and so on. This study incorporates such non-economic aspects of the transfers in order to provide a full picture of intergenerational transfers between the elderly and their children.

It was mentioned earlier that Caldwell's *wealth flows theory of fertility decline* is very useful because it establishes a direct relationship between family structure and fertility (Caldwell 1976b). According to the wealth flows theory, net wealth flows are primarily upward from younger to older generations in traditional farming societies in which the family economy is the mode of production, while in capitalist economies, the family structure is organised in terms of downward wealth flows where parents are expected to provide for childrens' economic well-being (Caldwell 1982). Consequently, when the net flow of wealth is positive, rational decisions supported by economical considerations the norm is to bear a maximum number of children that can be sustained and supported by the family economy. This is due to the fact that each additional child adds positively to a parent's wealth, security in old age and social and political well-being of the family (Caldwell 1982). In contrast, when the net flow of wealth is negative the situation becomes inverted and less children are born to the family. The theory of wealth flows dictates that the fertility transition from low to high is proportionate to the increase or decline in wealth flows in the family. Furthermore, Caldwell (1980) claims that this change in family structure was primarily due to the spread of new values that placed a premium on individual satisfaction and achievement, which emanated from the educated, middle-class in the west and was gradually exported to the developing world such as Sri Lanka through mass education. This aspect has been empirically investigated by Dissanayake (1995) and proved to be true in the case of Sri Lanka. Therefore, it is clear that the change in the direction of the net wealth flow between parents and children makes a significant impact in changing the

family structure and this has already occurred in Sri Lanka. As Sri Lanka is now more than 50 years from its onset of the fertility transition, it is reasonable to hypothesise that new family structures which emanated from the changes in family economies, and thus the changing direction of the intergenerational transfers, has now made a significant impact not only on family structure but has also substantially changed the role of the family when shifting from an extended to nuclear family type. Therefore, this study examines whether both elderly and educated adult children perceive that the role of the family has changed over the years and what factors were responsible. It is clear that childrens' improved education and hence enhanced employment of both men and women have made a significant impact on role of the family. According to the wealth flow theory, such benefits encourage high fertility in traditional societies where adult children are expected to support their ageing parents (Kaplan and Bock 2001). This has been true in Asia (Schroder-Butterfill 2003). However, in modern society, this encouragement is constrained by the individualism and many public assistance programmes for the elderly.

Hugo (1997) showed that high fertility is positively associated with perceptions regarding the likelihood of obtaining old age support in Indonesia. Schellekens (1993) found that old age security was correlated with high fertility in England and Wales in the 19<sup>th</sup> century, while Cain (1981) claimed that children provide risk insurance for the elderly in south Asia. He showed that women in Bangladesh desire high fertility to receive support from sons in old age as insurance. This evidence suggests that the theory of wealth flows has addressed the issue of transfer of wealth from adult children to the aged in the context of high fertility. Sri Lanka has gradually moved away from its traditional farming societal environment and hence, its fertility has declined. Its historical decline of fertility has currently produced a substantial proportion of elderly population. In gathering information through a micro-level study in Sri Lanka from both elderly and adult children, whether they expect old age security from their children or why they do not have children and whether the changing role of the family over the years has made any influence on well-being of the elderly.

Hugo (1997, p. 110), while appreciating Caldwell's wealth flows theory of fertility decline, argued that its' implications for other social and economic transitions occurring in developing societies have been neglected. However, he further claimed that the theory has the capacity to provide sufficient explanation to patterns, causes and

consequences of population ageing as well. In most traditional societies, the position of the elderly is more favourable as the societal norm for the younger generation is to care for the elderly generation. Hugo (1997, p. 112) put forward some important elements that bolster such a complimentary position. They include,

“relative power that elderly possess in controlling productive resources, ready facilitation of elderly care due to family-based production mode, inbuilt ‘cultural props’ favouring respected and privileged position of the elderly, less burden for the elderly care because of higher proportion of younger to care for fewer older people arising from mortality effects, and readily available family members to provide economic and social support for the elderly due to low mobility”.

Therefore, it is clear that the elderly are in a more favourable position in a traditional society and hence, the net intergenerational lifetime flow of wealth is favour them. This provides some important propositions when analysing the changing role of the family in Sri Lanka because it allows for the testing of the fact that elderly were in a favourable position when the net wealth flow was upward and the country had more extended families under the ‘traditional farming’ family setup. This aspect is addressed by collecting information from the current elderly about the position of their parents’ generation in terms of the five aspects outlined by Hugo. It is expected such an analysis will shed an insight into the relationship between the changing role of the family and well-being of the elderly.

As mentioned earlier, although Caldwell’s intention was to explain the onset of the fertility transition with the use of net intergenerational wealth flows, Hugo (1997) went further and extended its’ premise to explain the relationship between the reversal of net intergenerational wealth flow and the well-being of the elderly when modernisation proceeds. He argued that when society undergoes the fertility transition, the position of the elderly will change because of five important factors (Hugo 1997, p. 113). They are

“reduced power of the elderly due to diminishing family economies, reduced care for the elderly due to women’s employment outside home’, less proportion of economically active younger to care for the elderly due to improved mortality and reduced fertility, reduced power of the older generation due to higher levels of education and greater emphasis on individualism and individual achievement, and reduced support for the elderly due to higher level of mobility by younger generation”.

This important extension of the theory of wealth flows is useful because it can be tested against those five propositions put forward by Hugo in Sri Lanka, when more and more adult children have started establishing nuclear families, due to modernising effects with the change in the mode of economic production. It is reasonable to hypothesise

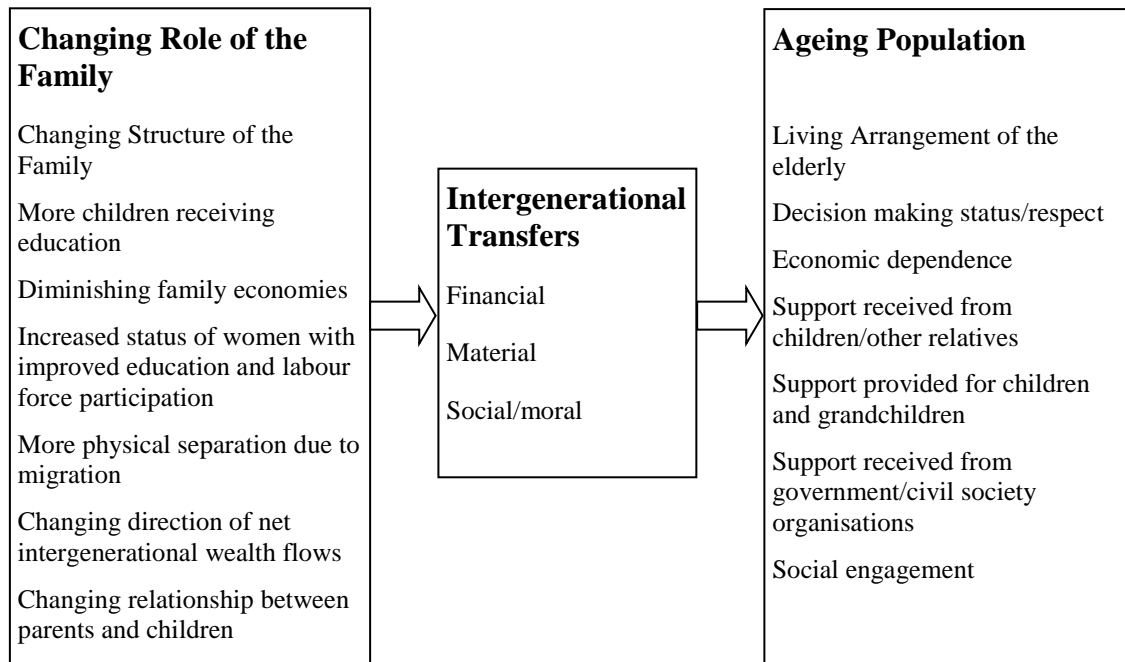
that those five propositions seem to be valid for Sri Lanka because it has already moved away from its traditional extended family structure to a modern nuclear one during the onset of the fertility transition (Dissanayake 1995). Therefore, Hugo's propositions will help in the examination of whether the changing role of the family has been making a significant impact on the well-being of the elderly and whether this is due to the reversal of net wealth flows.

## **2.6 Conceptualising the Relationship between the Changing Role of the Family and Ageing Population**

After reviewing various theories and conceptual propositions pertaining to both ageing and the changing role of the family, the relationship can be conceptualised as shown in Figure 2.1. The changing role of the family fundamentally consists of seven major factors and they are listed under the role of the family which in turn influence the well-being of the elderly through intergenerational transfers. When family moves away from extended to nuclear, the family structure is changed, and with increasing industrialisation and modernisation, the family economy is changed and more children participate in formal sector employment. Consequently, the status of women within the family is enhanced due to increased participation in education and formal sector employment. As the developing economies, including Sri Lanka, experience substantial flows of international and internal migration, such increased migration tends to separate some family members physically from their families (World Bank 2012; Ukwatta 2010). Subsequently, changing roles of family members in modern nuclear family structures substantially impact on the net intergenerational wealth flows between elderly parents and their adult children in the context of the changing relationship between parents and children.

When changes in role of the family occurred in the non-traditional family environment as mentioned above, both the direction and magnitude of various aspects of intergenerational transfers will be transformed. This study hypothesises that various aspects of intergenerational transfers between elderly parents and adult children function as intermediate variables between the changing role of the family and well-being of the aged. In other words, the changing direction and the level of intergenerational transfers will determine the status of the elderly.

**Figure 2.1: Conceptual Framework: Changing Role of the Family and Ageing Population**



In this conceptualisation, intergenerational transfers become vital in explaining the relationship between the changing role of the family and population ageing. Therefore, a major portion of analysis will focus on explaining how intergenerational transfers function as intermediate variables. This will be done by examining all the possible monetary and non-monetary transfers that flow between elderly parents and adult children, from data which has been gathered in the survey.

It is hypothesised here that the direction and the volume of net intergenerational transfers determine the well-being of the elderly population. The major components of well-being of the aged are living arrangements, decision making status, respect within the family and society, economic dependence, support received from children and relatives, as well as support provided to children and grandchildren, support received from government and civil society organisations and the capacity of social engagement of the elderly. It is assumed that they are greatly affected by the direction and level of the intergenerational transfers which are modified by the changing role of the family in non-traditional family settings. Therefore, this study is somewhat different from other studies, because it conceptualises the changing role of the family on the ageing population via intergenerational transfers hence, intergenerational transfers become the intermediate variables affecting well-being of the ageing population. In this context, it



is also assumed that the changing nature of the direction and the magnitude of the intergenerational transfers cannot be explained without considering the impact of the changing role of the family on intergenerational transfers. Hence, it is believed that this study will add a new dimension to the study of population ageing with its' conceptualisation and empirical evidence drawn from Sri Lanka. This study of the Sri Lankan situation is timely since the country has been moving away from its' traditional farming family situation to more non-traditional modern families, as well as the changing demographic components, mainly declines in fertility and mortality have already started modifying the age structure to produce more aged people at the upper ages. Therefore this study provides a unique opportunity to understand the mechanisms underlying the relationship between the changing role of the family and population ageing.

## **2.7 Conclusion**

This chapter has reviewed literature pertaining to the changing role of the family and ageing population in order to construct a strong theoretical base. The conceptual framework enables a new dimension to ageing studies by grouping the factors influencing an ageing population into two: explanatory and intermediate variables, which were not unequivocally available before. Although this chapter has reviewed theories under different contexts such as demographic perspectives of population ageing, theories that explain the changing role of the family, perspectives on intergenerational relationships, it was found that most of the theories overlap each other. They have identified major factors that exhibit the changing role of the family, intergenerational transfers/relationships and the ageing population. In respect to a theoretical foundation, it can be hypothesised that the changing function of the family is an explanatory variable of the well-being of the elderly population and can be influenced by intergenerational transfers/relationships, which are regarded as intermediate variables of ageing population. Within this strong theoretical base proposed here, it has been possible to devise a suitable methodology to achieve the study objectives which are discussed in the next chapter.

## CHAPTER 3

### DATA SOURCES AND METHODOLOGY

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#### 3.1 Introduction

This chapter describes the sources of data and research methodology employed in the research process. Mixed method data collection strategies are those that are explicitly designed to combine elements of one method, such as structured survey interviews, with elements of other methods, such as unstructured interviews, observations or focus groups in either a sequential or a simultaneous manner ( Axinn and Pearce 2006 p. 1; Pearce 2002; Fricke 1997; Kertzner 1997; Kertzner and Fricke 1997; Axinn *et al.* 1991; Sieber 1973). The study adopted a, *sequential experimental design* of the mixed method approach because it is an approach which characterises the adoption of quantitative approach first, and then the subsequent integration of a qualitative approach into the collection of data and analysis. The quantitative approach adopted here shows the level as well as the direction of the relationship between the elderly parent generation and adult children in both traditional and modern settings, and the qualitative approach offers a full explanation as to why such a relationship exists.

The study uses both primary and secondary data. Secondary data are gathered from various sources available within the country as well as from other international organisations, such as the United Nations. They are used to establish the changing nature of the family as well as trends in population ageing at the macro-level. Primary data are collected using a sample survey of elderly people and adult children. This is complemented with focus group discussions with elderly, in-depth studies with both elderly and adult children, and key informant interviews carried out with the agencies related to population ageing in Sri Lanka, such as the Elderly Secretariat, and non-governmental organisations working on the welfare of the elderly population and aged care homes. This chapter describes the survey design used in the primary data collection, as well as the sampling process employed in the study and consequently the sample sizes for each category of the population that were investigated namely the elderly living alone or with spouse only; elderly living with children and the adult children who do not live with their elderly parents. These population sub-groups were

further separated into urban and rural samples in order to make the sample representative of the general population.

### **3.2 Mixed Method Paradigm**

A mixed method approach is used here because its primary objective is to obtain a complete picture of human behaviour with the use of more than one method of observation (Jeanty and Hibel 2011, p. 636; Morse 1991). A mixed method study comprised of the collection of both quantitative and/or qualitative data in a single study, which is gathered concurrently then integrated during various stages in the research process (Creswell 2013). Creswell and Clark (2007, p. 5) defined mixed methods as follows:

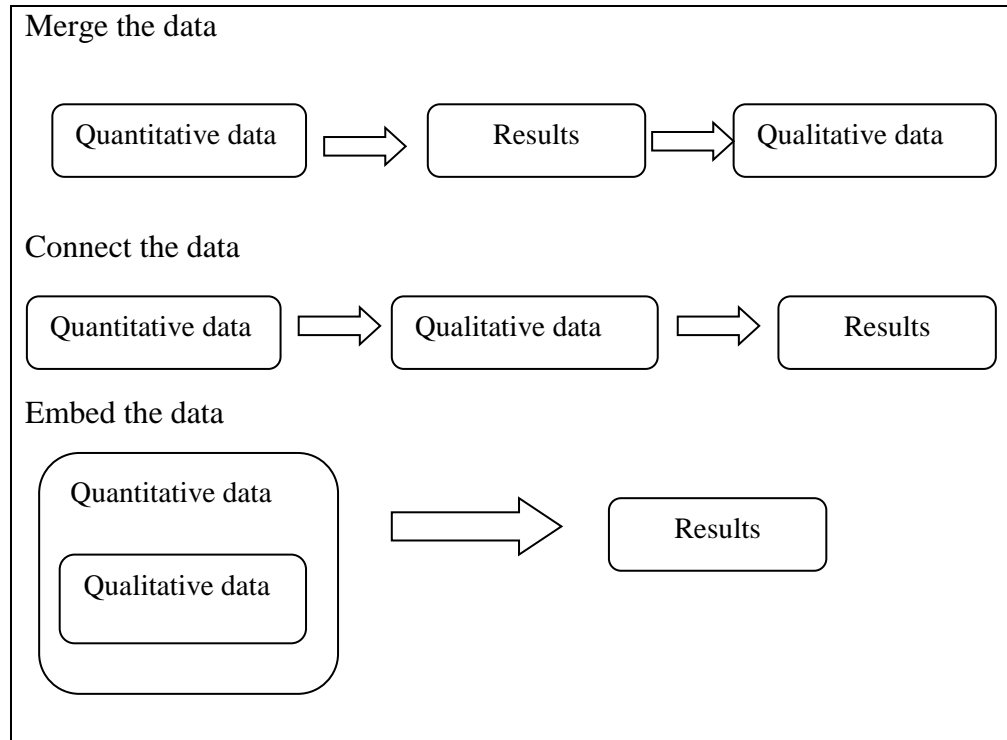
“Mixed methods research is a research design with philosophical assumptions as well as methods of inquiry. As a methodology, it involves philosophical assumptions that guide the direction of the collection and analysis of data and the mixture of qualitative and quantitative approaches in many phases in the research process. As a method, it focuses on collecting, analysing, and mixing both quantitative and qualitative data in a single study or series of studies. Its central premise is that the use of quantitative and qualitative approaches in combination provides a better understanding of research problems than either approach alone”.

Mixed methods helps the researcher to provide an opportunity to evaluate the integrity of the data better than a single approach (Teddlie and Tashakkori 2003, p. 14). As this study investigates family changes and the intergenerational support system related to ageing during different time periods, mixed methods are better than obtaining information from one method alone.

This study using both quantitative and qualitative approaches also combines both period and cohort data. Cohort data will help to understand how different generations (elderly, adult children and grandchildren generations) behave in terms of family roles and intergenerational wealth transfers, while period data provides a better understanding of how various changes occur to the society at different time points that relate to different generations. By mixing the datasets, the researcher acquires a unique position to offer a better understanding of the problem than if either dataset had been used alone (Clark and Creswell 2011; Neuman and Neuman 2006). Simple data mixing is more than collecting and analysing quantitative and qualitative together. Data mixing includes merging or converging the two datasets, connecting the two datasets by placing one

construct on the other, or embedding one dataset within the other (Clark and Creswell 2011). Figure 3.1 suggests that it is not simply to collect and analyse two data sets together but the data sets are “mixed” in a suitable way to form a more complete picture of the problem than they do when standing alone (Creswell 2003).

**Figure 3.1: Three Ways of Mixing Quantitative and Qualitative Data**

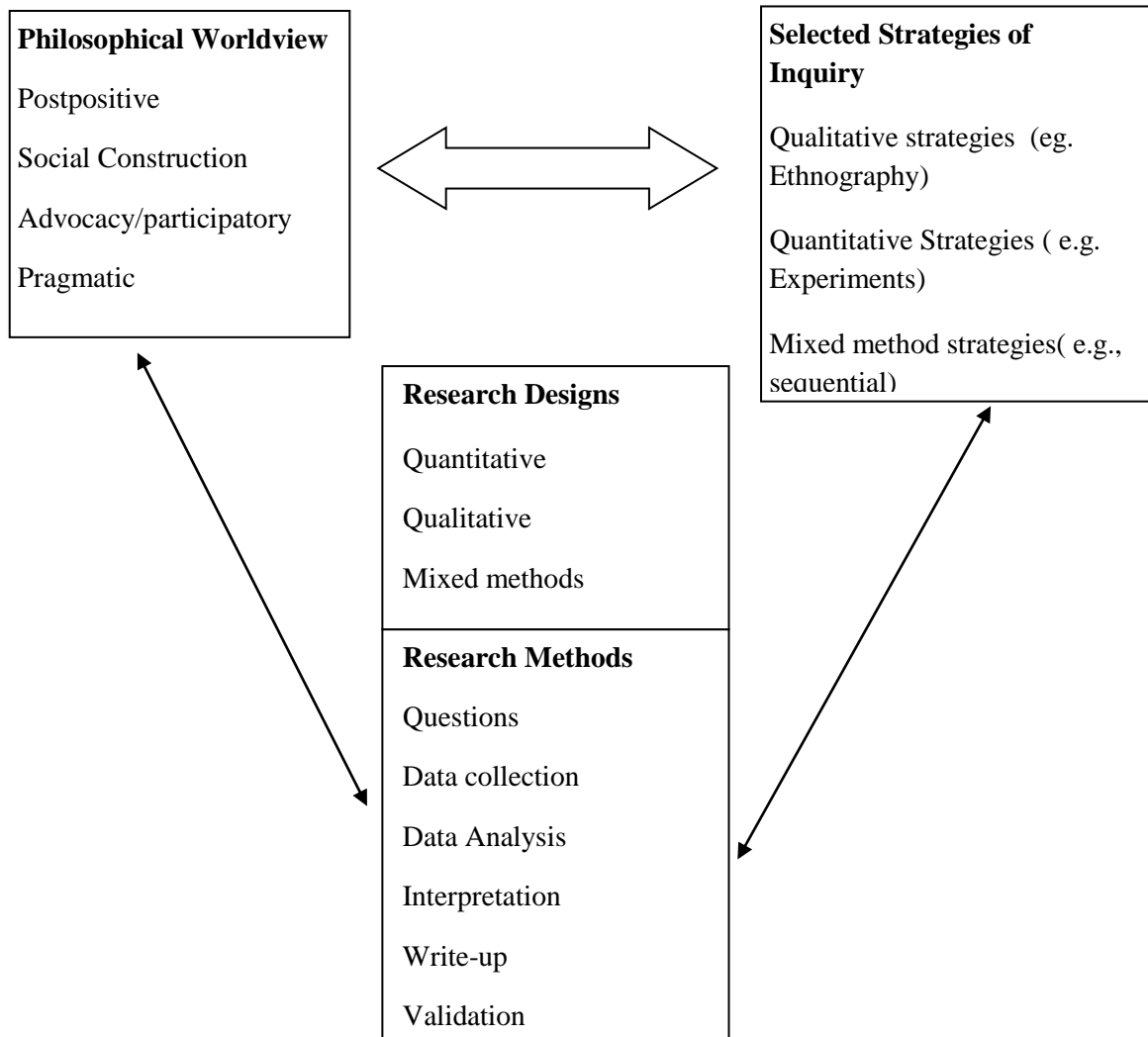


Source: adopted from Creswell 2003, p. 19

### 3.3 Philosophical Underpinnings of the Mixed Method Approach

This section explains the importance of using the mixed method approach from a philosophical perspective. The mixed methods worldview/paradigms (Creswell 2009) has come in to existence because of the distinctions drawn between the “*positivist/empiricist* approaches and the *constructivist/phenomenological* orientations (Tashakkori and Teddlie 1998, p.3). It is a well known fact that the positivist view is the foundation for quantitative methods, while the constructivist philosophy is the cause of qualitative methods (Jeanty and Hibell 2011; Johnson and Turner 2003). These philosophical ideas recognise the effectiveness of choosing a mixed method approach. Figure 3.2 illustrates the interrelationship between the philosophical views, strategies of inquiry, and research methods as put forward by Creswell 2009, p. 5:

**Figure 3.2: Interconnection among the Philosophical Views, Strategies of Inquiry and Research Designs/methods**



Some researchers argue that these philosophical distinctions are fundamentally incompatible but others say that quantitative and qualitative methods are compatible (Jeanty and Hibel 2011; Reichardt and Rallis 1994; Howe 1988). This paradigm shift has been recognised as ‘pragmatism’ in research (Jeanty and Hibel 2011; Cresswell 2009; Johnson and Onwuegbuzie 2004). In this regard, a number of key points in relation to pragmatism and mixed methods made by (Tashakkori and Teddlie 1998, p. 22-30) are listed below:

- Pragmatism supports the use of both qualitative and quantitative research methods in the same research study and within multistage research programs. Pragmatism rejects the either/or dichotomy;
- Pragmatist researchers consider the research question to be more important than either the method they use or the paradigm that underlies the method. The research question predominates;

- Decisions about the use of mixed methods, qualitative methods, or quantitative methods depend on the research question and the stage of the research process; and
- Pragmatism avoids the use of metaphysical concepts such as “truth” and “reality” that have caused much debate and at times divisions (Jeanty and Hibel 2011, p. 637).

Therefore, for the mixed methods researcher, pragmatism provides an opportunity to use multiple methods, different worldview/paradigms, and different assumptions, as well as different types of data collection and analysis (Creswell 2009, p. 11). The basis for the pragmatism is that the research approach needs to be mixed in order to obtain the best answers to the research questions addressed in the study (Johnson and Onwuegbuzie 2004, p. 16). Similarly, Johnson and Turner (2003, p. 297) indicate that a fundamental principle of mixed method research is that methods should be mixed in order to improve the strength of data and also to avoid overlapping weaknesses. This makes us aware of the weaknesses embedded in both qualitative and quantitative methods (Jeanty and Hibel 2011). At the same time, a mixed method provides the researcher with several standpoints from which to analyse a topic. It also symbolises a valuable method for triangulating data (Johnson and Onwuegbuzie 2004; Creswell 2003; Teddlie and Tashakkori 2003; Cresswell 1994). Hence, this study uses a qualitative design through in-depth studies and focus group discussions to obtain insights into the role of family change and its effects on the well-being of the elderly. A structured survey was carried out as the quantitative approach in order to quantify and examine the relationship between the changing role of family and population ageing.

### 3.4 Mixed Method Approaches

The mixed method paradigm has a number of approaches. Morse (2003,1991) presented four kinds of mixed method approaches. According to Morse (2003, p. 197) the four mixed method approaches are presented below:

No.	Approach	Type
1	QUALITATIVE + Quantitative	Simultaneous
2	QUALITATIVE → Quantitative	Sequential
3	QUANTITATIVE + Qualitative	Simultaneous
4	QUANTITATIVE → Qualitative	Sequential

The plus (+) sign indicates simultaneous collection of quantitative and qualitative data. An arrow (→) is used to indicate that one form of data collection procedure follows another. Upper case of letters (e.g. QUANTITATIVE, QUALITATIVE) indicate the major emphasis on the form data collection while lowercase letters (e.g., quantitative, qualitative) point out the less emphasis (Clark and Creswell 2011; Jeanty and Hibel 2011). According to Morse (2003, 1991) there are two types of designs, simultaneous and sequential. In the sequential design, one form of data, either the qualitative or quantitative, is collected before the other and in the simultaneous design; both are carried out at the same time (Morse 2003). In this study, the fourth type was used qualitative methods followed the quantitative survey research. In addition, Creswell and others (2003, p.224) have identified six different types of mixed method designs that a researcher can employ. They are, Sequential Explanatory; Sequential Exploratory; Sequential Transformative; Concurrent Triangulation; Concurrent Nested and Concurrent Transformative. The most relevant mixed method design here is Sequential Explanatory Design because quantitative information was collected and analysed first which was followed by the collection and analysis of qualitative information.

### 3.5 Sequential Explanatory Design

The sequential explanatory design is “characterised by the collection and analysis of quantitative data followed by the collection and analysis of qualitative data” (Creswell *et al.* 2003, p. 223). Table 3.1 shows the steps in the sequential explanatory design.

**Table 3.1: Sequential Explanatory Design**

Design type	Implementation	priority	Stage of Integration	Theoretical Perspective
Sequential Explanatory Design	Quantitative followed by qualitative	Usually Quantitative, can be qualitative or equal	Interpretation phase	May be Present

Source: Cresswell *et al.* 2003, p. 224

As mentioned previously sequential explanatory design, as indicated in Table 3.1, was adopted implementing the quantitative design followed by a qualitative design. During the analysis and interpretation stage both methods were integrated together. This design

is very appropriate since the objective of the sequential explanatory design is “to use qualitative results to assist in explaining and interpreting the findings of a primarily quantitative study” (Creswell *et al.* 2003, p. 227) which is the prime approach of this study.

### **3.6 Mixed Methods Design and Ageing Studies**

It is apparent from the literature that ageing studies have started to use more mixed methods in ageing research. In gerontology, although quantitative methods have been used widely, there are numerous studies that provide a rationale for combining quantitative with qualitative research (Jeanty and Hibel 2011; Nuwaha *et al.* 2000; Mays and Pope 2000; Ekblad *et al.* 2000; Easton 1999; La Veist 1995). It has also been claimed that mixed qualitative and quantitative research methodologies can provide the best of the naturalistic and positivist paradigms (Jeanty and Hibel 2011, p. 635). For example, the quantitative approach can confirm a number of hypotheses about the placement of older adults in institutional settings but cannot produce a deeper understanding of the meaning of ageing in these settings. Therefore, by mixing the qualitative and quantitative paradigms a deeper understanding can be made (Jeanty and Hibel 2011). Clarke (2009) showed that when seeking the meaning of chronic disabling conditions in later life from a social psychological perspective, a mixed method approach is likely to offer the most complete image. In the fields of geriatrics and gerontology, complex circumstances of interaction (e.g. care-giving) and complicated systems (e.g. families or nursing homes) are often investigated with mixed methods approaches. Although mixed methods research has been evolving over the last 50 years, only recently that a considerable focus has been given to merging them (Creswell and Clark 2007; Teddlie and Tashakkori 2003; Morgan 1998). However, gerontological researchers have been at the forefront of mixing qualitative and quantitative research approaches.

### **3.7 Secondary Data Sources**

Secondary data can frequently cover a larger population and is useful when it is difficult to obtain primary data (Dillon *et al.* 1994). Secondary data for the study was collected from appropriate sources, such as population ageing surveys and censuses conducted in



Sri Lanka. Secondary data can play an important function especially in the investigative phase of the research where macro-level causal relationships are determined by defining the research problem and generating appropriate hypotheses (Vartanian 2010). Therefore, the analysis of secondary data invariably improves the understanding of the research problem and the various lines of inquiry that could be followed (Vartanian 2010). Hence, secondary data sources were useful to establish a macro-level causal relationship between the two phenomena under study. It is assumed that the family role has been changing and population ageing is already occurring in Sri Lanka. There is a need to first establish the timing and the nature of changing trends in the family and ageing population in order to determine whether there has been any impact of family change on the ageing population in Sri Lanka.

### **3.7.1 Census Data**

Data from the population censuses from 1871-2012 were gathered and analysed to understand the nature, and patterns of family change and functioning in Sri Lanka, at the macro-level. Demographic and other socio-economic data are used to establish the onset of family change as well as the onset of population ageing which are two major events examined here. A series of censuses available in Sri Lanka provide a unique opportunity to trace three generations, which are the current elderly, adult children and grand-children. Understanding the nature and structural changes of these three generations plays a crucial role in explaining the relationship between changing family roles and population ageing. Information was drawn and analysed both at the individual and household level from the censuses from 1871 to 2012 in order to examine the following aspects.

- Fertility Change
- Change in Mortality
- Change in Size and Structure of the Households
- Female Headed Households
- Women's Economic Participation
- The Impact of International Migration on the Family
- The Impact of Internal Migration on the Family
- Demography of ageing
- Impact of Ageing on Family

### **3.7.2 United Nations Data Sources**

United Nations (UN) data sources can be regarded as one of the most important data bases to collect reliable data for the world in general, and other major areas and specific countries, including Sri Lanka. The Population Division of the Department of Economic and Social Affairs of the United Nations have been engaged in the analysis of population ageing for some time. Despite preparing national estimates and projections of older populations, the Population Division has also analysed the determinants and consequences of population ageing. It is important to note that the Population Division is the organisational unit of the Secretariat, charged with monitoring progress towards the achievement of the goals set out in the Programme of Action of the International Conference on Population and Development, held in Cairo in 1994. The Programme of Action voiced objectives and recommended actions relating to population ageing and older persons (United Nations 2002).

For this study, data are obtained from the demographic trends provided by the United Nations' World Population Ageing 2013 which provides a good description of global trends and the socio-economic features of the elderly (United Nations 2013). United Nations' *'World Population Ageing Report and the 2008 Revision of the official United Nations World Population Estimates and Projections'* (United Nations 2009) are also very relevant. In addition, the first ageing report in (UN 2002) which was released in conjunction with Second World Assembly in 2007 also provide valuable data on ageing. Furthermore, data on living arrangements and marital status were compiled from various United Nations publications, such as the Demographic Yearbook database of the Statistics Division of the United Nations Department of Economic and Social Affairs (including updates through to August 2009), and data from the Demographic and Health Surveys programme (United Nations 2013, 2009). Accordingly, the UN information was used to compare the population of Sri Lanka with other developed and developing countries. The UN information also includes some important determinants of population ageing in addition to the changing patterns of ageing, so they were also analysed to understand the trends in the changing family in Sri Lanka in comparison with the world trends, specifically those in the Asian regions.

### **3.8 Primary Data Collection**

A study which is based only on secondary data can have reliability and bias issues because data may have already been manipulated for various purposes depending on the objectives of the data collection (Vartanian 2010). In addition, secondary data sources are often dated and include restricted information on the topic being studied. Furthermore, validity is one of the key concerns in research, as the quality of research makes it trustworthy and scientific. The use of scientific methods in research makes it logical and acceptable (Hox and Boeije 2005). Primary data can enhance the validity of research when it is based on a sample that is representative of the target population. Reliability is the confidence that the research can be adequately trusted. Since survey data was collected through field tested questionnaires, it is expected that the results for this study will be highly reliable and valid (Hox and Boeije 2005). Primary data was obtained through a semi-structured questionnaire survey, in-depth interviews and focus group discussions.

### **3.9 Survey Research**

Surveys can be regarded as one of the most important areas of measurement in applied social research. The broad area of survey research encompasses any measurement procedures that involve asking questions from respondents (Neuman 2006). It involves the collection of information from a sample of individuals through their responses to questions. Survey research owes its continuing popularity to its versatility, efficiency, and generalisability.

According to (Kelley *et al.* 2003, p. 261):

“The term ‘survey’ is used in a variety of ways, but generally refers to the selection of a relatively large sample of people from a pre-determined population (the ‘population of interest’; this is the wider group of people in whom the researcher is interested in a particular study), followed by the collection of a relatively small amount of data from those individuals. The researcher therefore uses information from a sample of individuals to make some inference about the wider population”.

Data are collected in a standardised form. This is usually, but not necessarily, done by means of a questionnaire or interview. Surveys are designed to provide a ‘snapshot of how things are at a specific time’ (Denscombe 2010). Surveys are well suited to descriptive studies, but can also be used to explore aspects of a situation, or to seek

explanation and provide data for testing hypotheses. Surveys can be conducted in different methods such as questionnaires, interview, observations etc. (Neuman 2006).

Survey research is the main data collection methodology used here. As mentioned in the research methodology literature, a written questionnaire and formal interviews were used to gather information on the background, behaviour, beliefs and attitudes of a larger number of people (Neuman 2006, p. 43). Two questionnaires used in the study are as follows:

- Collecting information from the elderly population – Parent generation (60+ Households)<sup>10</sup>
- Collecting information from the adult children (Less than 60+ households)<sup>11</sup>

### **3.10 Defining Elderly Population**

The ageing of the population is commonly defined as the increase in the relative proportion of the elderly in the population (United Nations 2013, 2009; Siddhisena and DeGraff 2009; Myers 1985). The United Nations World Ageing Report in 2013 succinctly explains the population ageing as follows:

“Population ageing, which entails an increasing share of older persons in the population, is a major global demographic trend which will intensify during the twenty-first century. For statistical purposes, and unless otherwise specified, in this report older persons are considered to be those aged 60 years or older. Ageing results from the demographic transition, a process whereby reductions in mortality are followed by reductions in fertility. Together, these reductions eventually lead to smaller proportions of children and larger proportionate shares of older people in the population. Ageing is taking place almost everywhere, but its’ extent and speed vary” (United Nations 2013, p.3)

Defining the ageing in the developed and developing world is different due to the use of different age definitions. In the Western world, age 65 years and above is generally considered as the onset of ageing, while for most of the developing countries it is age 60 years and above (United Nations 2013, 2009; Siddhisena and DeGraff 2009; Myers 1985). In Sri Lanka too, age 60 and above is identified as the elderly population, as the most common mandatory retirement age in the public, private as well as the corporate sectors, falls between 55 and 60 (De Silva 2010b; Siddhisena and DeGraff 2009).

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<sup>10</sup> See Appendix 6

<sup>11</sup> See Appendix 7

### **3.11 Survey Questionnaire**

Malhotra (2006, p. 176) describes the importance of the use of questionnaires in survey design as follows:

“A questionnaire is the main means of collecting quantitative primary data. A questionnaire enables quantitative data to be collected in a standardised way so that the data are internally consistent and coherent for analysis. A questionnaire ensures standardisation and comparability of the data across interviewers, increases speed and accuracy of recording, and facilitates data processing”.

#### **3.11.1 Questionnaire for Elderly Parents**

From the elderly parent generation, information was collected from one elderly member in the household (60 years of age and above). If there were two elderly persons (eg. Male and Female) living in the same household, the respondent was selected on the basis of who was available for the interview. Information on household characteristics, social and economic characteristics, living arrangements, income and expenditure, daily living requirements, involvement in social, religious and cultural activities, health, leisure, family and knowledge on welfare activities, and welfare facilities, was gathered in order to explore the impact of the changing role of the family on the well-being of the elderly population and consequently address the policy implications of ageing in Sri Lanka.

Another major component of this study is the investigation of the impact of migration on family change and the elderly population. Therefore, information was collected on intergenerational responsibilities and support. This helped to investigate the present intergenerational support system prevalent in Sri Lanka. Moreover, such an investigation revealed the problems that have emerged as a result of changing family roles, especially with changing intergenerational responsibilities.

#### **3.11.2 Questionnaire for Adult Children**

Information was also collected from selected households where there are no 60+ people but only the adult children generation. In this regard, the head of the household/spouse in selected families was interviewed. This questionnaire was again designed to collect household information, place of living, income and expenditure, information on their elderly parents, information of internal and international migration, opinions on the changing role of the family and intergenerational transfers and support systems, to

identify the family changes and changing intergenerational transfers. These households were selected from those who are below 60 years of age only. It was considered that the presence of the two groups in the same household would affect their responses to the survey questions because they would not be able to view their opinions of each other freely.

### **3.12 Sampling Process**

Matara, Galle and Kegalle all showed a higher proportion of elderly population compared to the rest of the 22 districts. However, the Galle district was selected since it showed the highest proportion of elderly population in both the 2001 and 2012 censuses.

The Galle district is located in the Southern Province of Sri Lanka and considered as the Southern capital city. It derives its' name from the historical port town of Galle. The district is approximately 120 km away from Colombo and recognised as one of the main tourist areas for both domestic and foreign tourists. Although the coastal tip of the district is urbanised, remote and rural areas are found in the interior part of the district (Department of Census and Statistics 2012). Therefore, the Galle district can be recognised as a district which has both urban and rural populations. It consists of 18 Divisional Secretary (DS) divisions and 895 Grama Niladhari (GN) divisions. Galle District has an area of about 1652 Km<sup>2</sup>. The total population in the district is 1,058,771 and has a population density of over 600 persons per Km<sup>2</sup>. The Galle district is bounded on the north by Benthara River, south and west by the Indian Ocean and east by Matara and Rathnapura districts (Department of Census and Statistics 2012). The climate of Hiniduma Pattuwa in Galle is very similar to the central hill country of Sri Lanka. This area consists of rainforests, which is the water catchment area for most of the rivers and lakes which flow across the Galle District. The Galle district lies in a temperate climate zone.

Key indices of population and socio-economic characteristics in the Galle district are shown in Table 3.2. It shows that there is 14.8 percent of the population made up of elderly. The Galle district consists of 88.9 percent of rural population compared to 11.1 percent urban population. District statistics further show that the female population outnumber the male population. The average household size was 3.9, showing more or

less two children per household. It is a high literate district with the recorded literacy rate of 93.6. The unemployment rate of the district is 6.37 percent which is higher than the national average of 4.4 percent.

**Table 3.2: Galle District: Key Indices of Population and Socio-economic Characteristics, 2012**

<b>Characteristics</b>	<b>Number</b>
Total Population( 2012)	1,058,771
Male population	508,497
Female population	550,274
No. of DS Divisions	18
No. of GN Divisions	895
Total Households(2012)	269,740
Average Household size(2012)	3.9
Population density( 2012)	640 persons per Km <sup>2</sup>
Child Population	268,217
Working age population	636,680
Elderly Population( 60+)	153,874
Percent population- urban	11.1percent
Percent population- rural	88.9percent
Urban areas	45 Km <sup>2</sup>
Rural areas	1607 Km <sup>2</sup>
Literacy rate	93.6
Unemployment Rate	6.37
Percentage of poor households	10.3 percent

Source: Department of Census and Statistics 2012

Within the Galle district, two Divisional Secretariat (DS) Divisions were selected. Galle Four Gravets DS Division was selected for the urban sample, which recorded 12.6 percent of elderly population and 65 percent of population residing in urban areas, whilst Baddegama DS Division was chosen for the rural sample, which recorded 16.5 percent of elderly population and almost all the residents are regarded as rural population. Almost all the DS divisions in the Galle district have more than 12 percent of age 60 and over population. It is important to note that the Baddegama DS Division, from which the rural sample was selected, has the highest percentage of elderly population in the district. Galle Four Gravets is the DS division where the Galle city is located and hence, was essential to draw an urban sample from the Galle Four Gravets DS division.

**Table 3.3: Galle District: Distribution of Elderly Population by DS Divisions, 2012**

<b>DS Division</b>	<b>Percent of Population 60+</b>	<b>Urban Population</b>	<b>Rural Population</b>
Bentota	15.6	N.A	49,084
Balapitiya	15.3	N.A	66,284
Karandeniya	12.2	N.A	61,627
Alpitiya	15.9	N.A	63,457
Niyagama	16.4	N.A	34,666
Tawalama	12.8	N.A	32,113
Neluwa	11.2	N.A	28,303
Nagoda	15.4	N.A	52,708
<b>Baddegama</b>	<b>16.5</b>	<b>N.A</b>	<b>73,584</b>
Walipitiya	15.2	N.A	28,651
Ambalangoda	14.9	19,843	36,263
Gonapeenuwala	14.8	N.A	21,395
Hikkaduwa	14.1	26,589	72,635
<b>Galle Four Gravets</b>	<b>12.6</b>	<b>85,298</b>	<b>15,099</b>
Bope	15.3	N.A	49,547
Akmeemana	14.1	N.A	42,468
Kakkalamulla	15	N.A	45,203
Imaduwa	15.6	N.A	44,223

Source: Department of Census and Statistics 2012

Galle Four Gravets DS Division is the most urbanised area of the Galle district. It is situated in the coastal boundary of Sri Lanka and considered as a very attractive tourist area. Baddegama is one of the rural Divisional Secretariats in Galle district, and is situated 18 km away from the Galle City, with an area of about 111 Km<sup>2</sup>, consists of 6.9 percent of the total land area. Average household size of the Galle Four Gravets DS Division is 4.5 compared to 3.8 of the Baddegama DS Division. The density of the population in the former is 6 times greater than the Baddegama DS Division, showing how attractiveness of this urban division. However, the Galle Four Gravets DS Division has more children and working age population (Table 3.4).



**Table 3.4: Sri Lanka: General Information in Galle Four Gravets and Baddegama Divisional Secretariats, 2012**

Category	Galle Four Gravets	Baddegama
Area( sq km)	24 Km <sup>2</sup>	111 Km <sup>2</sup>
No. of GN Divisions	50	70
Total Mid-year population	101,159	74,732
Population per sq km	4,214	673
Total no of households	22,217	19,530
Average household size	4.5	3.8
Total male population	48,639	35,769
Total female population	52,520	38,963
Sex ratio	92.6	91.8
Child population	26,997	18,247
Working age population	61,347	44,130
Elderly population( 60+)	12,815	12,355

Source: Sampath Pathikada, Galle Four Gravets 2012, Sampath Pathikada, Baddegama, 2012

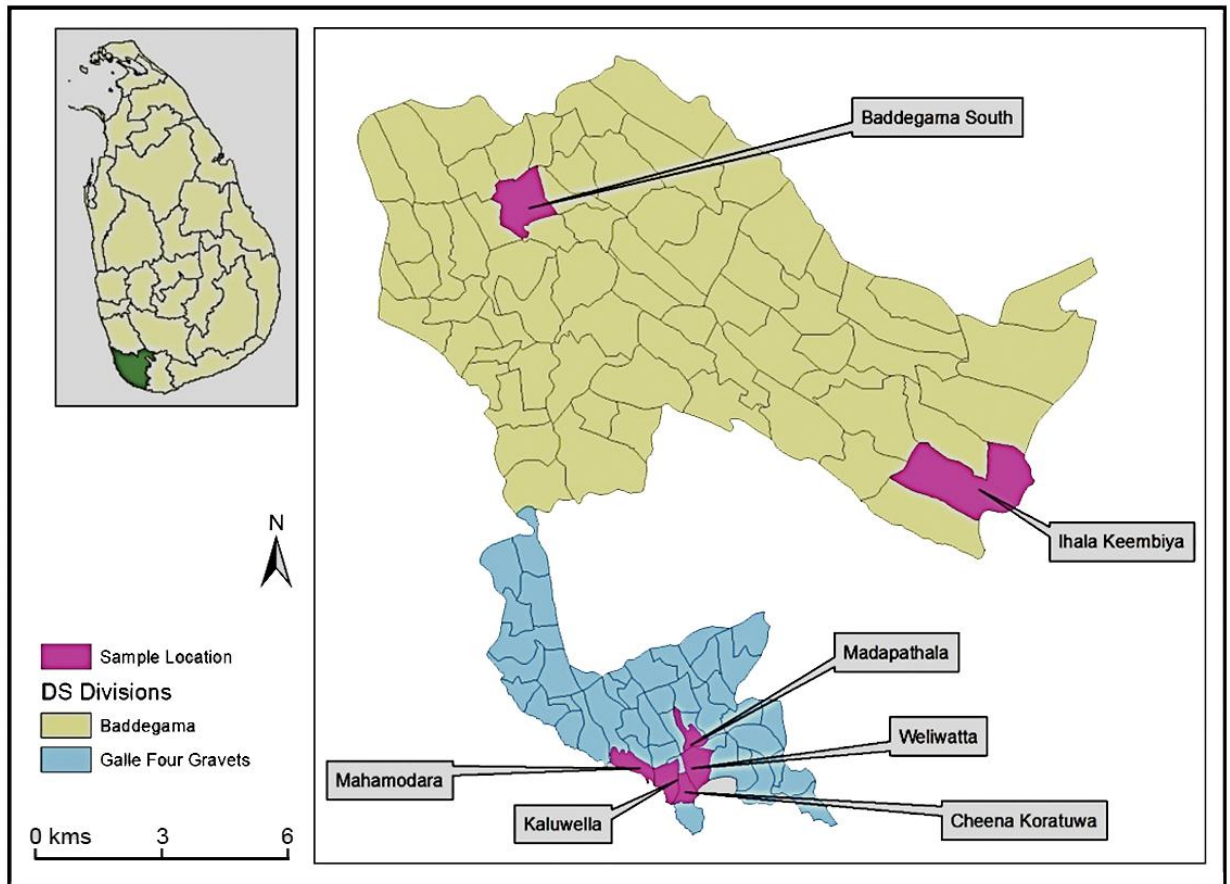
Once the two DS divisions were identified, *Grama Niladhari*<sup>12</sup> (GN) divisions from each DS division were selected. These GN divisions represent the highest urban and rural proportions in the respective DS divisions. Accordingly, the sample included two GN Divisions from the Baddegama DS Division and five GN divisions from the Galle Four Gravets DS Division. Figure 3.3 shows the sample areas of the study.

Subsequently, households for the sample were selected from an electoral voting list available for each GN division as it provided the latest and most accurate list of population. Since the required sample size could not be drawn from the elderly living alone from the first two GN divisions selected from the Galle Four Gravets DS Divisions, three more GN divisions were again selected to complete the sample for elders living alone or with spouse. By being urban, Galle Four Gravets contained more commercial ventures and thus it is understandable that the required sample could not be drawn only from two GN Divisions.

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<sup>12</sup> Headman in rural and urban areas and they considered to be the lowest government officer at local level.

**Figure 3.3: Sample GN Divisions, Galle District, Sri Lanka**



Source: Data obtained from Department of Census and Statistics

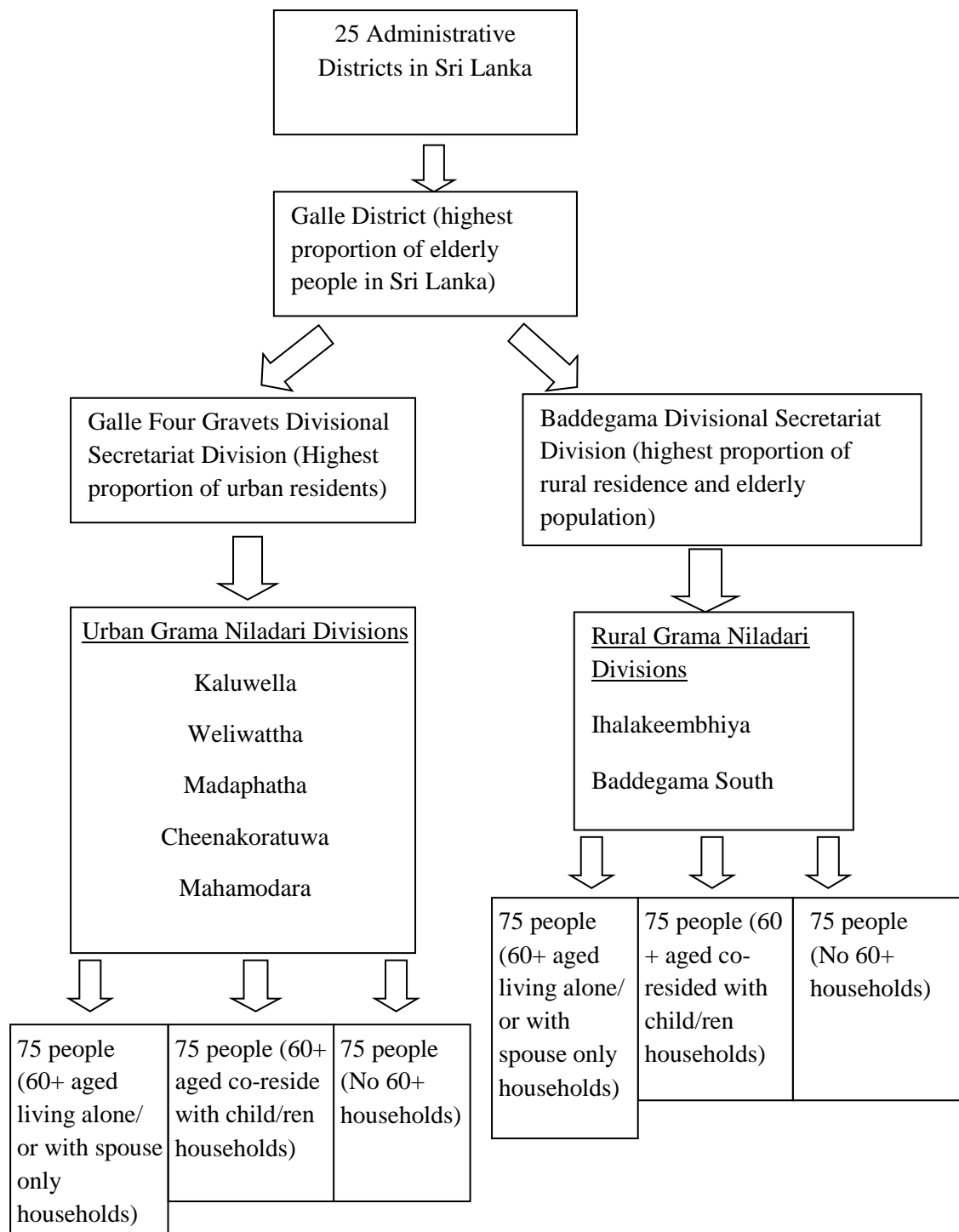
Figure 3.4 shows the sample process of the study carried out by using the 18 Divisional Secretariat Divisions of the Galle District. Two DS Divisions were selected on the basis of the highest number of elderly population and with the consideration of the urban-rural dimension of the district.

Once the sampling frame was prepared, all the households were classified on the following basis to divide it into three strata:

- Households with person aged 60+ in household not living with children ( living alone or with spouse only)
- Households with person aged 60+ in household but living with children and/or grandchildren
- Households with no person aged 60+ in household

This allowed the study to identify three generations: grandparents, parents and children and/or grandchildren, which is the essential basis to explore the intergenerational relationships in terms of wealth and other transfers.

**Figure 3.4: Sample Process of the Study**



### 3.13 The Sample Size

The total sample size was determined as 450 consisting of 150 from each stratum (aged 60+ living with children, aged 60+ living alone or with spouse only and no persons

aged 60+ in households) which was classified on the basis of generation, age, and residential status of the aged. Subsequently, 150 in each strata (75 urban, 75 rural) was selected randomly. According to the process described earlier, 5 and 2 GN Divisions were selected from Galle Four Gravets and Baddegama DS Divisions, respectively. Total elderly households for each GN divisions were examined then random selections were made to draw a sample for each category as depicted in Table 3.5. The sampling frame and the respective sample numbers drawn from each one are presented in Table 3.5:

**Table 3.5: Sampling Frame and the Sample**

DS Division	GN Division	Total Households	Total Elderly Households	Households of Elderly Living alone or with spouse only)	Sample selected: Elderly Households (elderly living alone or with spouse only)	Household of Elderly Living with children or somebody	Sample selected: Elderly Households (elderly people living with Children)	Households with adult children (No 60+ Households)	Sample selected: Households of adult children (No 60 + person households)
Galle Four Gravets	Kaluwella	294	127	12	75	115	75	167	75
	Welliwaththa	520	229	28		201		291	
	Mahamodara	293	116	06		N.A		N.A	
	Madapathala	511	213	21		N.A		N.A	
	Cheenakoratuwa	226	117	13		N.A		N.A	
Baddegama	Ihalakeembhiya	430	190	36	75	154	75	240	75
	Baddegama South	619	289	44		245		330	

Source: Voting lists available at the each DS office 2012

### 3.14 Drawing the Sample

It is a general feature of social enquiry to design and select appropriate samples for research studies whether the research design is quantitative or qualitative (Ritchie *et al.* 2003, p. 77). The survey carried out in this study used stratified sampling and simple random sampling techniques to draw the sample of 300 elders and 150 adult children in the following manner:

- The total sample size was determined as 450 households;
- The sample was drawn in two stages, first by focusing on urban and rural classifications and secondly, by drawing the sample according to living arrangements of the elderly and their adult children;
- The samples were drawn from three categories of population, 1. Population aged 60 years and above who live alone or with spouse only; 2. Population aged 60

years and above who live with their adult children and Population of (adult children) aged less than 60 years who live without elderly;

- Accordingly, urban and rural samples consisted of 75 households for each category of population as shown in Tale 3.7; and
- Once the stratified samples for urban/rural and population groups were identified, a simple random sampling technique was used to draw a sample of households within each stratum.

**Table 3.6: Sampling for the Survey**

Living arrangement (Strata)	Place of residence (Strata)	
	Urban	Rural
Aged 60 +years living alone or with spouse only	75	75
Aged 60+ years living with child/ren	75	75
Aged less than 60 years (adult children) living without elderly	75	75
Total	225	225

This stratified sampling procedure was adopted because the first stage of selection had two strata as urban and rural samples while for the second stage had three strata representing population sub-groups. The second step was to take a simple random sample within each urban and rural stratum. This way a randomised probabilistic sample (Agresti and Finlay 2008) was selected within each stratum. There were concerns about the response rate for the survey because failure to achieve an adequate response rate<sup>13</sup> would have limited the usefulness of the study. Therefore, the response rate was improved by replacing non-respondent households with those who were able to respond. The non-respondent households were those who were not available at the time of the survey even after repeated visits to those households.

### 3.15 Data Collection

Preparatory work for data collection was also an important process of the research work. In this study, preparatory work was carried out from March 2012- July 2012. It included, ethical approval, translation of questionnaires, visit to the study area, meeting with key officials in the study area, selection of research assistants, pre-testing the questionnaire from a pilot study. The questionnaires were refined based on the pre-test, and field work was carried out from August 2012 to December 2012. Five research

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<sup>13</sup> In the simplest sense, response rate is the number of participants who completed a questionnaire divided by the total number of participants who were asked to participate.

assistants were used to undertake the survey questionnaire. They were all well-trained graduates of the University of Colombo, Sri Lanka, and were given one day training about the purpose of the study, questionnaire and the area of the study. They were deployed to conduct the pre-test and subsequently, a long discussion was held to discuss issues that emerged from the questionnaire in the field and other related key issues. The researcher also actively participated in the field in the data collection phase together with the research assistants. In-depth studies and the focus group discussions were done only by the researcher drawing assistance from a research assistant. Appropriate cases for in-depth interviews were drawn with careful screening of survey questionnaires and considering the field experiences of the research assistants and the researcher.

### **3.16 Ethical Consideration**

It is clearly understood that the ethical consideration is central to the success for any research study (Ritchie *et al.* 2003). Hence, the required ethical approval was given by Human Research Ethics Committee of the University of Adelaide before undertaking the survey. Informed consent forms were distributed among the participants before the field study in order to make them understand the purpose of the research and also to obtain their consent to participate. It was necessary because in any research, the informed consent of participants in the research process needs to be obtained (Ritchie *et al.* 2003, p. 66). This means providing them with key information about the purpose of the study, the funder and who the research team is.

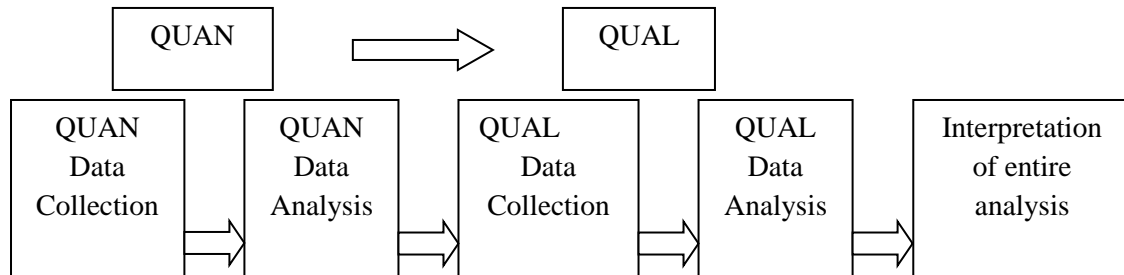
### **3.17 Data Analysis and Presentation**

Data analysis and presentation are the two major components of any research process. Quantitative data analysis was done from the data collected from secondary and the primary sources, while the Qualitative data analysis was done from the data collected from primary sources. As indicated previously mixed method data analysis techniques were used.

The study used both quantitative as well as qualitative data which were triangulated to provide a complete picture. Triangulation involves the use of different methods and sources to check the integrity of, or extend, inferences drawn from the data within each type of analysis (Ritchie 2003). Figure 3.5 clearly shows how the quantitative analysis followed by the qualitative analysis and finally interpretation of the entire analysis. The

analysis was carried out in the context of the theoretical framework proposed in chapter 2 of the study.

**Figure 3.5: Sequential Explanatory Design**



Source: Cresswell *et al.* 2003,p. 225, Morse 2003,p. 197

### 3.18 Analysis of Secondary Data

Analysis of secondary data available in large data sets provides a mechanism for researchers to address high impact questions that would otherwise be prohibitively expensive and time-consuming to study (Smith *et al.* 2011). It is clearly understood that secondary data analysis is an analysis of data that was collected by someone else for another primary purpose (Boslaugh 2007, p. ix). In this study, some secondary data sources, mainly Census data, United Nations Data Sources were used. Firstly, these data sets were used in order to examine the changing family role as well as the ageing process in Sri Lanka as most of these data sets such as census and UN data sources, provide us with some time series data to gauge the processes. Secondly, secondary data was analysed to establish the macro-level relationship between the changing family role and ageing in Sri Lanka. Such an analysis cannot be done with the use of primary data alone and most importantly; this type of analysis can provide a unique opportunity to examine the mechanism underlying the above mentioned relationship with the use of primary data. The secondary data such as census, and other large-scale ageing surveys are also highly useful in establishing contexts for primary survey data collection.

### 3.19 Analysis of Primary Data

Survey data were analysed by using the Statistical Package for Social Sciences (SPSS) software package while the qualitative data was analysed through a thematic framework and by performing content analysis. Before data from the questionnaires were entered, a careful screening of each questionnaire was undertaken. In this way, data were edited

and consequently, open-ended questions were coded. Subsequently, data entered into the SPSS master file, and consistency checks of the data were performed by running frequencies for each variable and then data were cleaned. The data analysis is mainly based on uni-variate and bi-variate analyses, which were obtained with the use of contingency tables.

### **3.20 Qualitative Investigation**

In this study, two main qualitative investigations were carried out. They are namely, 'in-depth interviews' and 'focus group discussions'. Qualitative investigations characteristically commence with detailed narrative descriptions, construction of the in-depth case studies of the phenomenon under study, and, finally, comparison and the interpretive search for patterns that cut across cases (Patton 2005, p.1). Qualitative data can be collected from the field research as well as from historical comparative research. Field research is where the researcher directly observes and record on peoples actions in natural settings for an extended period of time (Neuman 2006, p.46). On the contrary, in historical comparative research, the researcher examines data on events and conditions in the historical past and/or in different societies (Patton 2005). In this study, the researcher directly observed and recorded notes on peoples' natural setting and historical past.

#### **3.20.1 In-depth Interviews**

Qualitative data was collected from the in-depth interviews to provide an adequate explanation for the research questions. Qualitative inquiry typically focuses in-depth on relatively small samples (Paton 2005, p. 2), and in this study there were 20 such cases. Those in-depth interviews were drawn from the 450 survey respondents. It has been mentioned that 'the logic and power of purposeful sampling lies in selecting information rich cases in order to gather detailed information. Information rich cases are those from which one can learn a great deal about issues of central importance to the purpose of the inquiry (Paton 2005, p. 2). Moreover, it has also been claimed that the information-rich cases provide an in-depth understanding rather than empirical generalisation (Denzin and Lincoln 2011). Following this line of investigation, a purposeful sampling method was used to obtain rich information about life histories of



both elderly parents and adult children. It is expected that such an approach can provide a better understanding of the distinct behavioural patterns of the two cohorts in relation to their respective family roles and the intergenerational support and the transfer of wealth in the context of population ageing issues.

All the categories of people who were interviewed in the survey were included but they were further investigated to obtain more information under the urban/rural dimensions, as well as internal and international migration status of the adult children. In this regard, adult children who had migrated overseas and adult children who are currently residing in the study district after migrating from another district, were selected as cases for further investigation. This helped to establish whether there was any impact of their migration on the elderly population and whether it varied by urban/rural residential status.

### **3.20.2 Focus Group Discussions**

Focus group discussions were conducted after carrying out the field survey in order to obtain a clearer understanding of the behaviour of elderly people who are currently residing in elderly homes under institutional care. In this regard, two focus group discussions were held; one in Galle Four Gravets DS Division and the other in Baddegama DS Division. The former represents the urban sector while the latter corresponds with the rural sector. It was necessary to establish whether institutionalisation of elderly people were due to their own decisions or by their children, and the reasons for such actions. Focus groups are small group discussions, addressing a specific topic, which usually involve 6-12 participants, either matched or varied on specific characteristics of interest to the researcher (Patton 2005; Morgan and Spanish 1984; Fern 1982).

The field survey methodology was not employed to obtain information from the elderly who live in elderly homes since such interviews can make them uneasy as it is basically a one-to-one interview. The initial visit to the elderly home revealed that the elderly who reside there prefer to be in groups and enjoy their interactions and dialogues. On that basis, it was decided to have a focus group discussion as it allowed everyone to speak out and actively participate. In this respect, two elderly homes were selected with the help of the District Secretariat officials. “*Van Reeth Senior Home*” in Galle Four

Gravets DS Division and “*Senehasa Senior Home*” in Baddegama DS Division were selected for the study to carry out focus group discussions.

### **3.21 Analysing Qualitative Data**

It is generally known that data analysis can be a challenging experience in qualitative research (Clissett 2008, p. 102), and there are no universally accepted rules for analysing and summarising data (Polit and Beck 2013). However, qualitative studies tend to be flexible, involving the collection and analysis of words and actions with a view to gaining an insight into contradictory perspectives that people hold (Clissett 2008, p. 102). The qualitative data collected from the in-depth interviews and focus group discussion were analysed by using a thematic framework (Ritchie *et al.* 2003, p. 220). This framework is concerned with the collection and analysis of words, usually speech or writing (Carter and Porter 2000). Appropriate themes were developed when collecting as well as analysing the information of case studies of the elderly and adult children generations as depicted in Table 3.8. In-depth details of socio-economic background of the family members, attitudes towards family change, support between elderly parents and adult children, attitudes towards elderly care, migration impact of elderly care were collected from elderly parents and adult children.

Similarly, the themes exhibited in Table 3.9 were developed and subsequently used when analysing data which were collected through the focus group discussions held in two elderly homes. The information for reasons for institutionalised, the health status, the involvement with the society, assistance for daily living, welfare facilities, the attitudes towards family change, their experiences in the family, their attitudes towards supportive system between elderly parents and adult children were collected through focus group discussions.

**Table: 3.7: Themes for Analysing In-depth Interviews (Elderly Parents and Adult Children Generations)**

Themes
Socio-economic background of the family
Relationship between family members
Educational attainment
Employment
Marriage
Attitudes towards family change
Size and direction of the intergenerational transfer of wealth
Elderly care arrangements
Attitudes and expectations about support for elderly people
Migration and elderly care

**Table: 3.8: Themes for Analysing Focus Group Discussions**

Themes
Reasons for institutionalised
Health
Assistance for daily living(ADL)
Involvement of social, religious and cultural activities
Leisure
Welfare activities for elders
Experience in the family
Reasons for family change in Sri Lanka
Intergenerational support

### **3.22 Limitations of the Study**

Limitations of the study comprised of inability carryout the survey in all the districts with a more representative sample (urban, rural, estate), limited time allocation, limited funds and the incapability of following generations in a longitudinal framework in order to gather behavioral patterns of the elderly as well as adult children generation in relation to address the well-being of the aged. However, the latter was addressed to a great extent by gathering information retrospectively in both survey schedules as well as carrying out case studies and focus group discussions.

### **3.23 Conclusion**

This chapter outlined the sources of data used by indicating both secondary and primary sources. It further described how this study used secondary data to analyse the ageing process in Sri Lanka, as well as to document the historical evolution of the role of family change in the country. In addition, the chapter outlined the methodology adopted to collect primary data. Most importantly, the study described primary data was collected with the use of a structured survey questionnaire and then supplemented by the qualitative information collected through in-depth studies and focus group discussions. The subsequent chapters use all these sources to provide answers to research questions raised in the respective chapters. The next chapter examines the onset of ageing population and ageing process in Sri Lanka.

## **CHAPTER 4**

### **THE AGEING PROCESS AND IT'S ONSET IN SRI LANKA**

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#### **4.1 Introduction**

The main objective of this chapter is to explore the process and dynamics of ageing through time in Sri Lanka. Since the study hypothesises that family change and the ageing process have a strong interaction, it is important to investigate the period that the onset of ageing commenced, before discussing the changing nature of family in Sri Lanka. In this respect, various measures which can gauge the onset of ageing are used in order to find whether these different indices or measures give the same conformity.

The United Nations have recognised the importance of population ageing in the world and embarked in various ways to discuss, review and propose policy formulation that can suit different regions of the world (United Nations 2002). Population ageing have played a significant role in the number of key international conferences during the past two decades which include the International Conference on Population and Development (ICPD) held in 1994 (United Nations 2002). The ICPD acknowledged the economic and social effects of population ageing in all communities around the world and then proposed the Key Actions for Further Implementation of the Programme of Action of the ICPD, adopted in 1999, by re-stating the necessity for all societies to attend to the important consequences of population ageing that the world is going to encounter in the future (United Nations 1999). Most importantly, the 40<sup>th</sup> session of the United Nations Commission on Population and Development (CPD) was fully focused on the changing age structures of populations and their implications for development (United Nations 2007c). This session adopted a resolution to accommodate a number of policy issues related to ageing. These events suggest that the study of population ageing in Sri Lanka is vital given the implications for development.

#### **4.2 Pace of Population Ageing**

Population ageing, is the process by which elderly form a proportionately larger share of the total population, and as such is one of the most unique demographic events of the late twentieth century (United Nations 2013, 2009). Worldwide, the proportion of

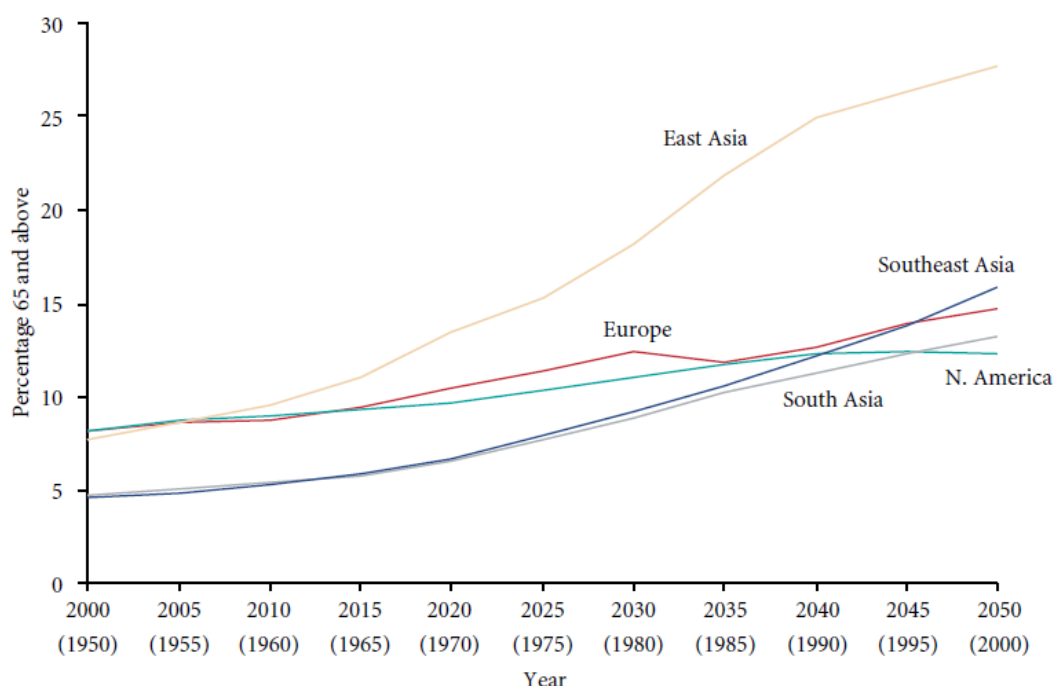
elderly was 8 percent in the 1950s, 10 percent in 2000 and by 2050 it is projected to reach 21 percent (United Nations 2013, 2009). Available evidence suggests that substantial fertility reduction and improvements in life expectancy during the past fifty years have gradually led to the constant rise in the aged population (United Nations 2013, 2009).

This event is equally reflective of the Asian and Pacific regions despite varied trends of ageing (United Nations 2001b). The diversity of demographic transition in the region is reflected in having three distinctive sets of countries in relation to population ageing: countries or areas (such as Japan) whose populations have already aged; those (such as Armenia, Georgia, Hong Kong, China, Macao, China, the Russian Federation, Singapore and Sri Lanka) whose population is likely to age very speedily in the near future; and those (such as Bangladesh, India, Indonesia, Malaysia and Pakistan) whose population is still young and ageing slowly or moderately (United Nations 2001b).

The increase in ageing populations is dramatic all over the world today. Although Asian countries are just beginning to experience population ageing, the process is occurring much more rapidly than was the case in Europe or North America as shown in Figure 4.1 (East-West Centre 2002). Although in the West, the ageing population occurred over 50 years, in Asia, the process has been compressed into 20 to 30 years. However, the Asian countries are facing several issues in terms of rapid ageing due to shorter time period available to prepare appropriate interventions, and at the same time, ageing is occurring when developing countries are at a lower level of economic development ( Palloni 2009; East-West Centre 2002; United Nations 2001a).

The growth rate of the elderly population in Asia is dramatic when compared to other regions of the world. It is clear from Figure 4.1 that the growth rate of the elderly population is higher in Asia than North America and Europe. Therefore, it is essential to take action to put appropriate plans in place in order to secure the well-being of this large proportion of elderly population which will appear in Asia.

**Figure 4.1: Expected Trends in Ageing in Major Regions of Asia in 2000–2050, Compared with Europe and North America in 1950–2000**



Source: Extracted from United Nations 2001 and East West Centre 2002, p. 86

Table 4.1 shows the projected growth of elderly population in Asia from 2000-2050 according to different regional classifications. South East Asia shows the highest growth rate in elderly, while South Asia where Sri Lanka is located, exhibits the second highest projected increase of the elderly during the period.

**Table 4.1: Actual and Projected Growth in Asia's Elderly Population from 2000-2050**

Region or Sub region	Number of people age 65 and above ( 1,000s)			Percent increase
	2000	2025	2050	2000-2050
Asia	206,822	456,303	857,040	314.3
East Asia	114,729	244,082	393,802	243.2
Southeast Asia	24,335	57,836	128,958	429.9
South Asia	67,758	154,385	334,280	393.3

Source: United Nations 2001,p. 83

Among the countries of Asia, it has been observed that Singapore in Southeast Asia and Sri Lanka in South Asia, have relatively large proportions of the population that are elderly (Jones 2012; East-West Centre 2002, p. 84; United Nations 2001b). Mongolia in East Asia, has the smallest proportion of elderly. Table 4.2 illustrates that the rapidity of

ageing in Sri Lanka is dramatic compared to other South Asian countries. The other two countries close to the ageing process of Sri Lanka are Bhutan and India. However, the projected values for Sri Lanka suggest a greater speed of ageing in the first half of this century compared to those countries.

**Table 4.2: Actual and Projected Population (60+) in South Asia from 2000 to 2050**

Country	Percentage of older persons( 60+) in the total population		
	2000	2025	2050
India	7.1	11.5	20.2
Bhutan	8.8	10.1	23.3
Pakistan	5.7	8.8	16.5
Maldives	5.5	8.5	20.0
Nepal	5.5	7.8	14.0
Bangladesh	5.2	9.2	17.0
Afghanistan	3.8	3.8	6.6
<b>Sri Lanka</b>	<b>9.3</b>	<b>19.7</b>	<b>29.0</b>

Source: Mujahid and Siddhisena 2009, p. 18

Table 4.3 shows that the percentage of elderly in Sri Lanka's population was 12.3 percent in 2012 while it is expected to increase to 21.9 percent in 2031. It is interesting to note that the average rate of growth of the elderly population has been greater than that of the total population (Figure 4.2), and the percentage of the ageing population has risen considerably since 1981.

**Table 4.3: Sri Lanka: Actual and Projected Total Population, Total Elderly Population and Percentage of Population Age 60+, 1946-2031**

Year	Population( '000)		Percentage of aged 60+
	Total	Aged 60+	
1946	6,657	360	5.4
1963	10,582	621	6.0
1981	14,847	986	6.6
1991	17,259	1,399	8.1
2001	16,930	1,907	9.2
2012	20,271	2,742	12.3
2021	22,324	3,980	17.8
2031	23,129	5,062	21.9

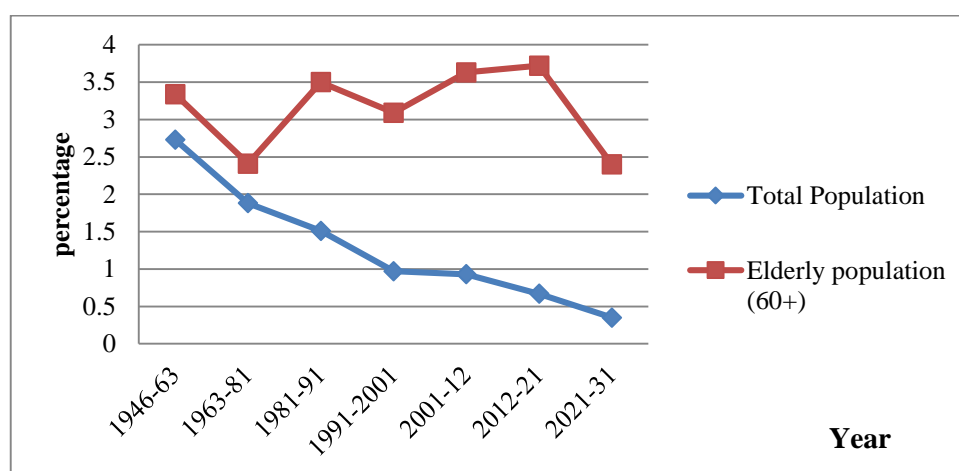
Source: Department of Census and Statistics 1982, 2013a; Siddhisena 2005 and De Silva 2007

Figure 4.2 shows the trend in the average annual growth rate of the total population and elderly population in Sri Lanka. It shows an upward trend in the growth rate of elderly



since the 1980s while the downward trend in the growth rate of total population is also observed then. It is also observed that growth continued at around 3.5 percent per annum until the 1920s and thereafter a sharp decline can be observed with the stabilisation of population in Sri Lanka around 23 million (Department of Census and Statistics 2013a).

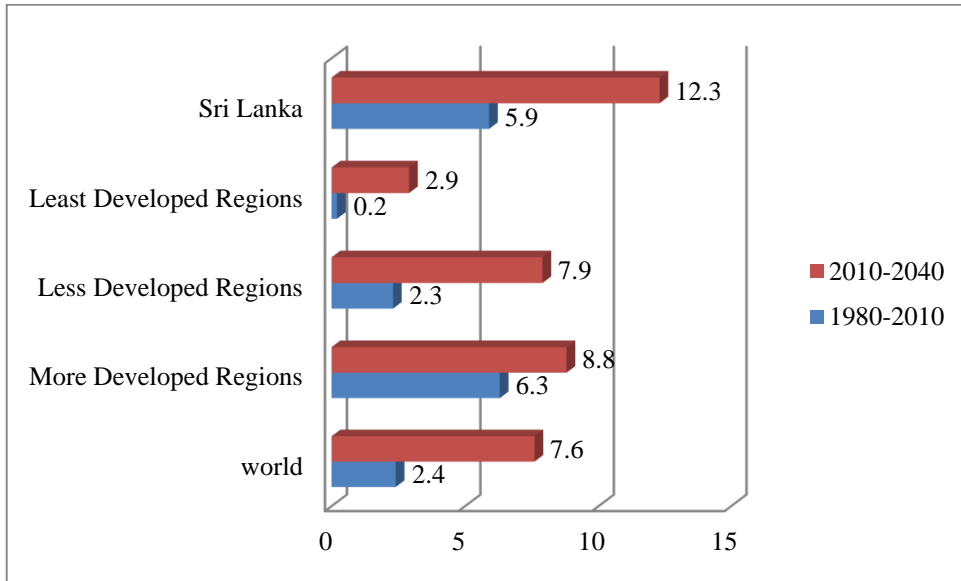
**Figure 4.2: Sri Lanka: Actual and Projected Trends of the Average Annual Growth Rate of the Total Population and the Elderly Population, 1946-2031**



Source: Drawn from data obtained from Department of Census and Statistics (1946 to 2012 census reports) for 1991, 2021 and 2031 projections from Department of Census and Statistics and De Silva 2007

Global population ageing will accelerate in the future because of the huge influx of aged expected in the developing countries. During the period, 1980-2010, the proportion of the population aged 60 years or over increased by 2.4 percentage points in the world (United Nations 2013). During the same 30 year period, more developed regions recorded a 6.3 percentage point increase whereas the increase in the less developed regions was 2.3 percentage points, which was very much less than the former. However, in the next 30 years, from 2010-2040, the world, it is expected to record a 7.6 percentage point increase (United Nations 2013). Figure 4.3 shows that this is mainly due to the contribution made by both the less and the more developed regions. Compared to all other regions, the least developed countries will experience a significant but a lesser increase of 2.9 percentage points. Most strikingly, Sri Lanka's ageing process was greater than the less developed, and least developed regions during the period 1980-2010, but it is expected that the speed of the ageing in Sri Lanka will be greater than all other regions of the world during the 2010-40 period.

**Figure 4.3: Actual and Projected Speed of Population Ageing (percent increase), World's Major Regions and Sri Lanka, 1980-2040**



Source: United Nations 2013 and De Silva 2007

Note: Sri Lankan figures are for 1981-2011 and 2011-2041

### 4.3 Demographic Determinants of Ageing

Fundamentally global population ageing is a process which is heavily influenced by mortality followed by the fertility decline that eventually produces older-age structures (United Nations 2001b). Advancements in medical science and increasing access to quality health care has led to a decline in mortality rates and improvements in life expectancy (World Bank 2012; Mujahid and Siddhisena 2009). Later, the enhancement of female education and the introduction of state-run family planning programmes facilitated further fertility decline (United Nations 2009; East-West Centre 2002). However, the increase in the life expectancy at birth and the decline in fertility levels have produced an ageing population in a global context and Sri Lanka is no exception. The ageing process is primarily determined by the relative size of the young and old population cohorts due to the declining fertility and mortality rates. However, international migration can have a significant impact on population structure of a country if there are substantial number of migrants at particular ages, which has accelerated the ageing process in Sri Lanka since 1970s (World Bank 2012).

#### 4.3.1 Fertility Decline and Growth of the Ageing Population

The world has experienced a continuous decline in fertility during the last few decades which has been regarded as the main driving force behind population ageing (United Nations 2013). The global total fertility rate (TFR) has declined from 5 children per woman in 1950-1955 to 2.5 children per woman in 2010-2015 (United Nations 2013). It is expected that this decline will continue further in the coming decades and the world's TFR will drop to 2.2 in 2045-2050 under the “medium” projection variant, or to 1.8 children per woman under the “low” variant (United Nations 2013). The resultant effect will be that the faster the speed of fertility decline, the more rapidly ageing will take place. The reductions in fertility have been more rapid in less developed regions and thus the gap between the more and less developed regions has lessened.

Sri Lanka is not very different to the world situation in relation to ageing. The total fertility rate has declined from 5.3 in the 1960s to 2.4 in 2012 (Department of Census and Statistics 2013a, 1982). In Sri Lanka, individual family planning, in response to economic pressure even in the absence of state-sponsored family planning programmes, can be regarded as a major contributory factor in the declining fertility rates (Dissanayake 1995). However, fertility decline during the post-transitional period accelerated in Sri Lanka due to the combined effect of substantial social development and the effective implementation of state-run family planning programmes (World Bank 2012). Table 4.4, shows the sharp decline in the TFR from the mid-1940s.

**Table 4.4: Sri Lanka: Total Fertility Rates, 1946-2012**

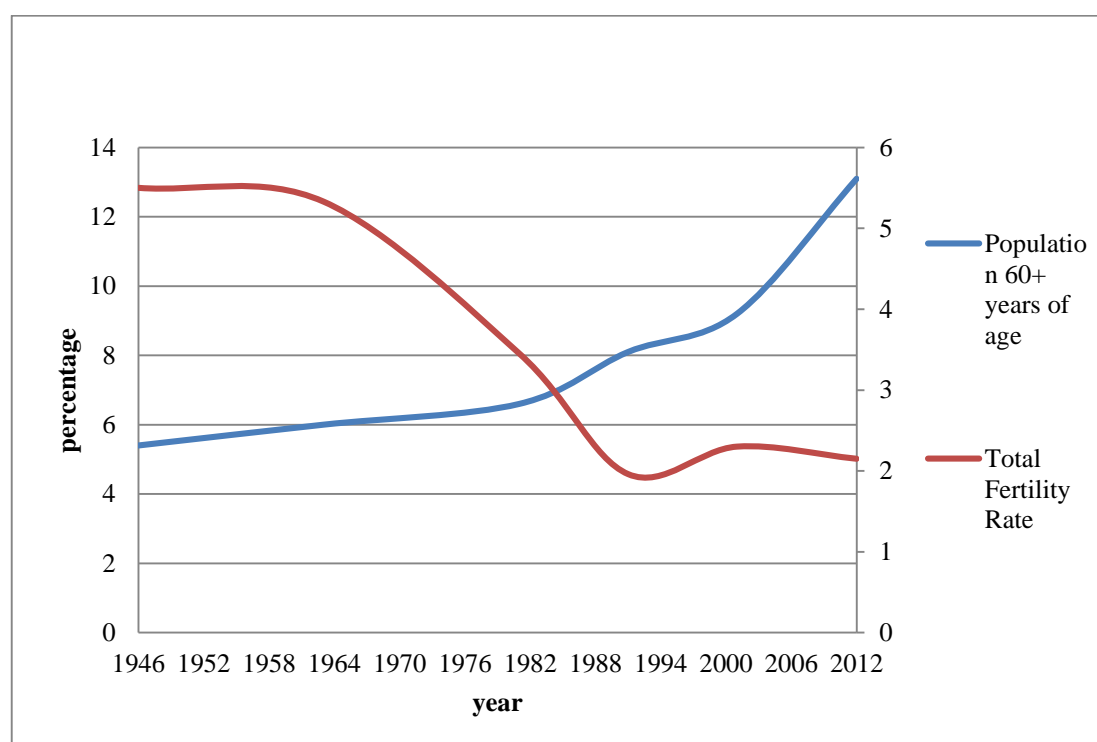
<b>Year</b>	<b>Total fertility rate (per woman)</b>
1946	5.50
1953	5.32
1963	5.33
1971	4.16
1981	3.45
1995-2000	1.96
2001-2006	2.30
2012	2.40

Source: For 1946-1981 and 2012- Census Reports, Department of Census and Statistics, from 1995-2000 and 2001-06 Demographic and Health Survey (DHS), Department of Census and Statistics.

The impact of fertility decline in Sri Lanka on the increase of the ageing population is substantial. The relationship between fertility and ageing can be clearly seen in Figure

4.4. TFR in Sri Lanka shows a continuous decline until the early 1990s although some fluctuations are seen after then. Such fluctuations are possible when TFR has reached a low stationary situation. The decline of the TFR has made the base of the age distribution narrow and the corresponding proportion of child population smaller. Similarly, the gradual movement of the number of people in other age groups upward has made a greater proportion of aged people accruing at higher ages. Therefore, the changes in TFR correspond with the rise in the proportion of the population at ages 60+ years. However, it is clear that the onset of ageing population started from 1980s with the accelerated fertility decline after 1980s' as the intersection between the TFR and aged population occurred in the mid-1980s.

**Figure 4.4: Sri Lanka: Elderly (60+ years) and TFR, 1946-2012**



Source: Drawn from data obtained from Department of Census and Statistics (1946 1963, 1981, 2001 and 2012 census reports) and for 1991 estimation from De Silva 2007

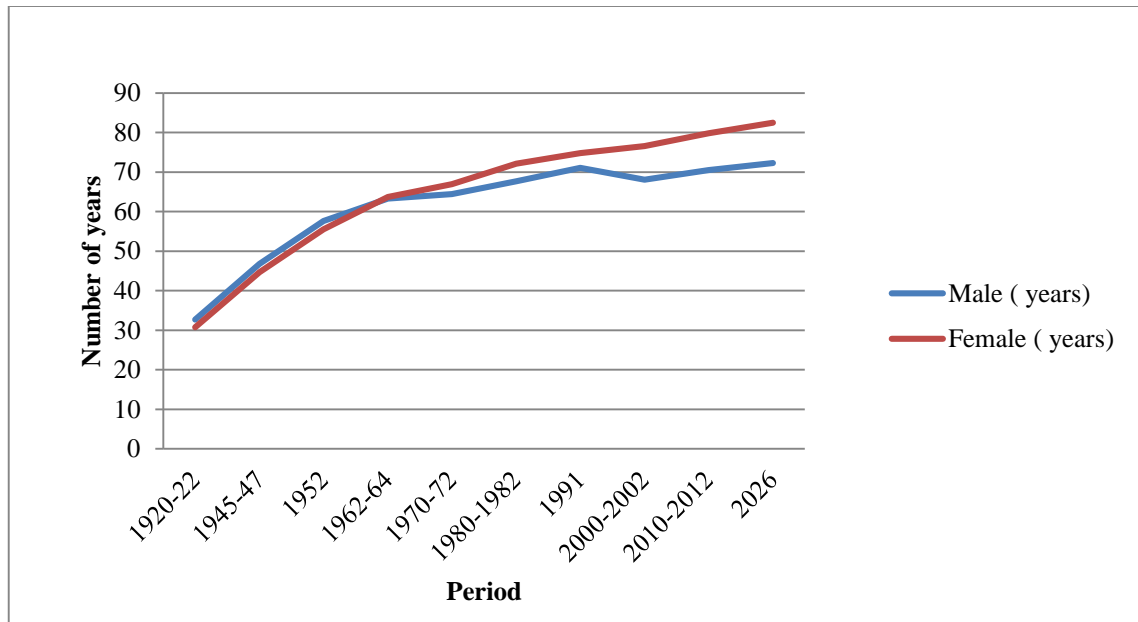
#### **4.3.2 Mortality Decline and Increase in Life Expectancy**

Continuous mortality decline will eventually produce a higher proportion of elderly population because of the improvement in life expectancy at older ages matched with low fertility. When mortality rates move toward lower levels, particularly at older ages, presupposes a progressively more important role in population ageing (United Nations 2013). Predominantly in developed countries, where low fertility has prevailed for a considerable period of time, the relative increase in the older population are now mainly determined by improved chances of surviving to older ages (Grundy 1996). During the period from 1960 to 2012 which is equivalent to five decades, life expectancy at birth in Sri Lanka increased by almost 20 years, from 57.6 years in 1960 to 77.8 years in 2010 (Department of Census and Statistics 2013a; Gunsekare 2008).

The decline in mortality has been the main cause of the initial changes in the stage of the demographic transition (United Nations 2013). A strong campaign to control infectious diseases such as malaria and tuberculosis, along with the successful control of recurrent epidemics of smallpox, cholera and yellow fever, added positively to improvements in the mortality rate as early as the 1920s (Gunsekare 2008; Dissanayake 2000a). The mortality rate fell sharply in Sri Lanka when public health programmes and campaigns for sanitation were undertaken, particularly to eradicate malaria, which led to an increase in life expectancy by 14 years between 1947 and 1954 (Dissanayake 2000a).

Average life expectancy at birth in Sri Lanka has increased considerably during the second half of the last century as shown in Figure 4.5. The most striking feature is the widening gender gap between male and females. However, this situation is common in both developed and developing countries at present, but the widening of the gap between men and women has been most significant in developing countries in recent decades (United Nations 2013).

**Figure 4.5: Sri Lanka: Actual and Projected Life Expectancy at Birth, 1946-2026**



Source: Gunasekare 2008 and Department of Census and Statistics; for 2026 projected data by De Silva 2007

The continued progress in life expectancy contributes to the increase in the proportion of older people, as more individuals survive to older ages. Thus, eventually, lower mortality and higher life expectancy end up reinforcing the effect of lower birth rates on population ageing (United Nations 2013, p. 6). In Sri Lanka, continued improvements in life expectancy at birth have produced a significant ageing population. Projected life expectancy at birth in Sri Lanka shows that it is reasonable to expect significant improvements in life expectancy during the next 50 years (Gunesekare 2008; De Silva 2007).

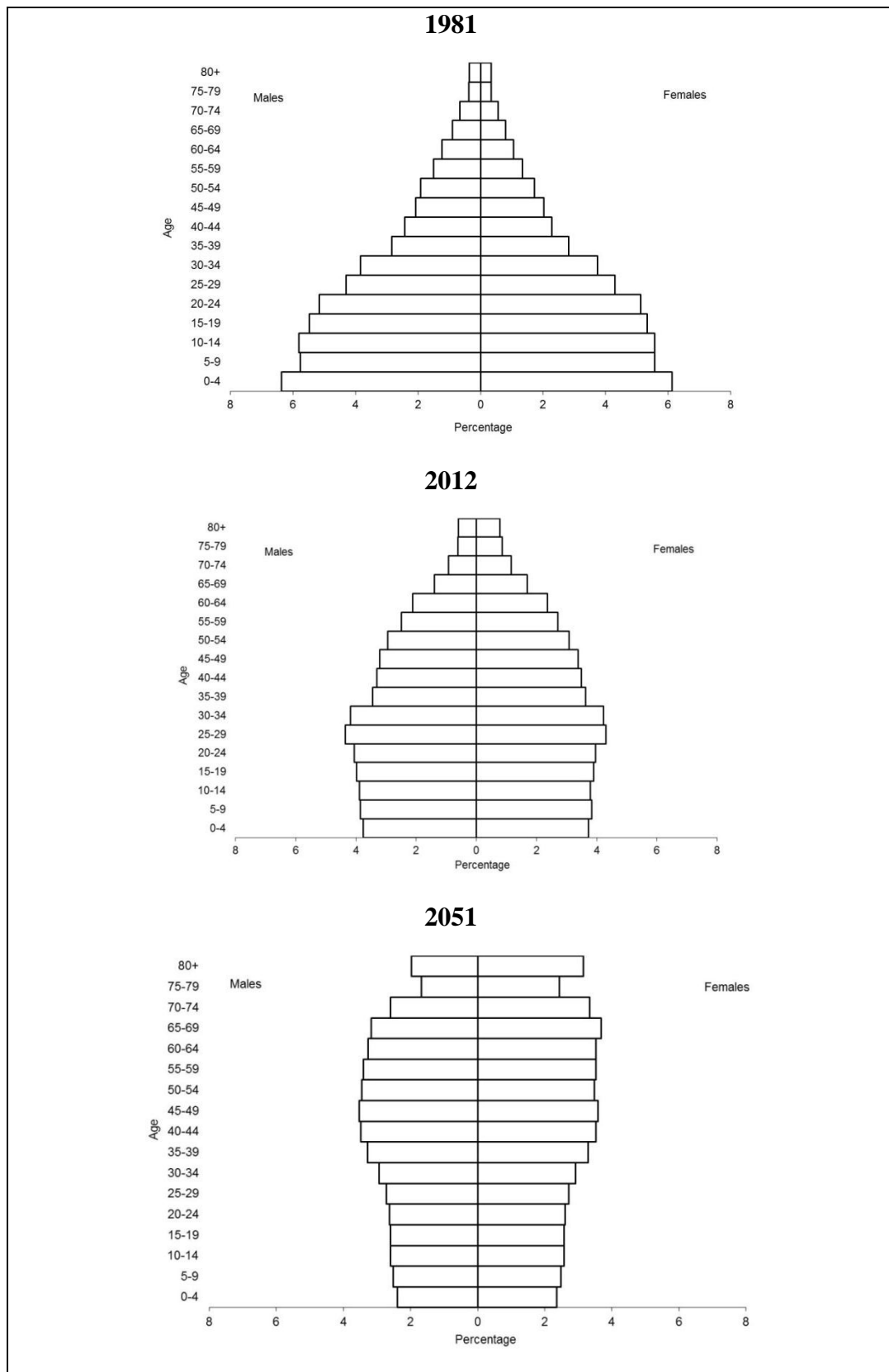
#### **4.4 Changes in Age Structure of Population**

The present and future age composition of populations evolve as a function of the past population size and distribution, future fertility, mortality and net migration (United Nations 2013, p. 17). Past trends in the size and distribution of Sri Lanka's population demonstrate a rapid decline in fertility and mortality which contribute to the change in the age-sex structure of the population. The Net migration rate in Sri Lanka also contributed to the changing age structure of the population with the international

migration leading to less younger people and an increasing proportion of older people in Sri Lanka (Department of Census and Statistics 2013a).

The relative increase in the proportion of old people and reductions in the youngest age groups has changed Sri Lanka's age structure from the typical pyramidal structure of most developing countries to a more rectangular shape similar to that of developed countries today. It is expected that the process will largely be complete by the middle of this century. Since there has been a decline in fertility close to the replacement level from the early 1990s' (World Bank 2012), each age cohort born after the late 1990s may be smaller than the preceding one, resulting in a tapering at the base of the age structure, which is already evident at present as shown in Figure 4.6. The age structure of Sri Lanka's population in 2012 shows that the broad-based age structure which appeared more than 30 years ago has now moved upward but a recent surge in births have produced a somewhat broad base in the young age cohorts (UNDP 2012). However, this recent upward trend in fertility can be seen as a temporary adjustment towards the considerable number of deaths that occurred due to the tsunami in 2004 and the 30 year-long civil war which ended in 2009 (UNDP 2012). Therefore, the projected population for Sri Lanka for the middle of this century with a continuous decline of fertility to low levels, will produce an age-sex structure where the bulk of the population is concentrated above the age 30 which will produce a considerable proportion of aged in the future years. It is important to note that by 2051, Sri Lanka is expected to have a significant proportion of elderly population and the pyramid will become inverted, as the number of older persons increase.

**Figure 4.6: Sri Lanka: Actual and Projected Age-sex Structure of Population, 1981, 2012 and 2051**



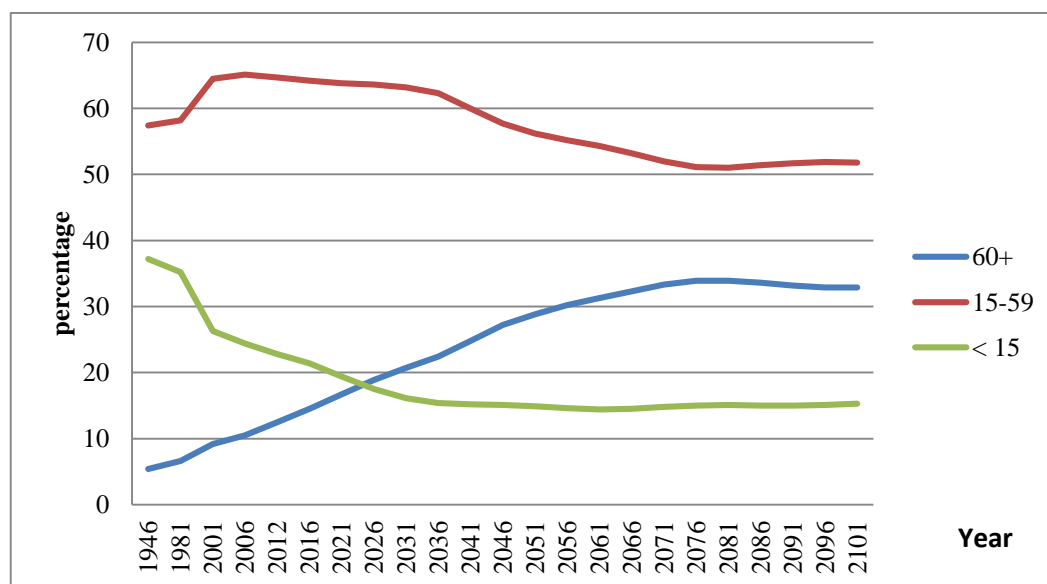
**Source:** Drawn from data obtain from the Department of Census and Statistics 1982 and 2013a, De Silva (2007)



#### 4.4.1. Changing Balance among Age Groups

Historically, the group of older persons have been much smaller than any of the other broad age-groups. However, this situation is no longer true in the more developed regions. Overall, the global situation will change significantly as the older population continues to grow rapidly while the younger age groups begin to stabilise (United Nations 2013, p. 17). In Sri Lanka, the increasing proportion of older persons have been accompanied by steady reductions in the proportions of younger persons as shown in Figure 4.7. The proportion of children (that is, children under 15 years of age) was 37.2 percent in 1946 which is projected to decrease to 15.3 in 2101. During the 2012-2101 period, the proportion of persons aged from 15-59 will change gradually, declining from 64.7 percent in 2012 to 51.8 percent in 2101. This clearly demonstrates a changing trend from youth dependency to older dependency. Furthermore, the long- term trend in this century demonstrates that the working age population will stabilise around 50 percent after 2080 whereas children below 15 years of age and elderly population will also stabilise around 15 percent and 32 percent respectively.

**Figure 4.7: Sri Lanka: Actual and Projected Population by Broad Age Groups, 1946-2101**



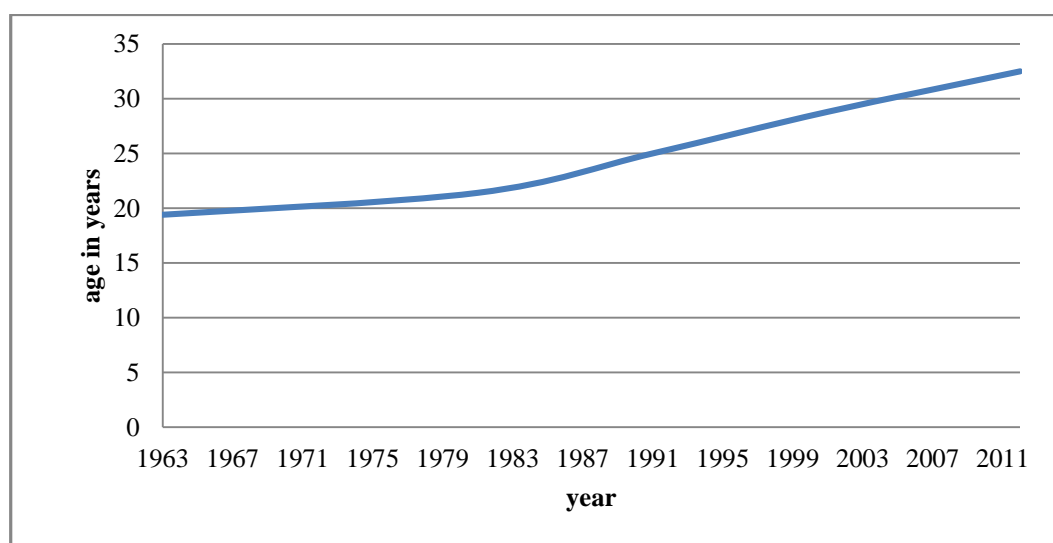
Source: Drawn from data obtained from Department of Census and Statistics (1946-2012 census reports) and for 2021- 2101 projections of Department of Census and Statistics and De Silva 2007

#### 4.4.2 Median Age

A manifestation of population ageing is the shift in the median age, the age that divides the younger from the older half of the population. Globally, the median age increased from 24 years in 1950 to 29 years in 2010, and is expected to increase to 36 years in 2050 (United Nations 2013, p. 20). The faster ageing in the less developed regions is reflected in the substantial shift in the median age from 26 years in 2010 to 35 years in 2050, which represents an nine year increase during a period of only 40 years (United Nations 2013, p. 20).

The trend in the median age of the Sri Lankan population over time has also started showing a substantial shift from the 1980s which establishes that the population ageing basically commenced in the 1980s (Figure 4.8). It further shows that median age has increased from 21 years in 1981 to 32 years in 2012 which shows 11 years increase during the period.

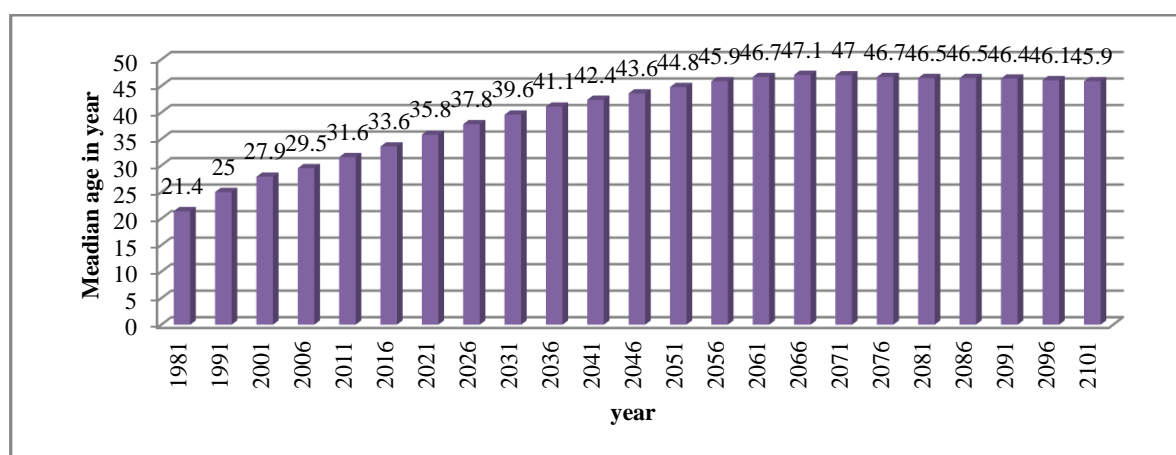
**Figure 4.8: Sri Lanka: Median Age of the Population, 1963-2012**



Source: Drawn from data obtained from Department of Census and Statistics (For 1963, 1971, 1981, 2012 census reports); 1991 projections from Department of Census and Statistics

A rapid increase of the median age will reflect rapid ageing of the population. Figure 4.9 shows that in Sri Lanka, half of the population in 2001 was below 27.9 years of age while at the turn of the century half of the population in Sri Lanka is expected to be below 46 years of age (Figure 4.9). It is also seen that the median age in Sri Lanka will stabilise around 45 years of age from the middle of this century. This suggests that a rapid population ageing process is already taking place in Sri Lanka.

**Figure 4.9: Sri Lanka: Actual and Projected Median Age, 1981-2101**



Source: Drawn from data obtained from Department of Census and Statistics 1982, 2002, 2013a and De Silva (2007)

## 4.5 Relative Status of the Dependency Ratio

The age structure of a population can be broadly categorised into three groups such as children, working age population and the elderly. If there is a significant change in the relative size of a particular age group, it can change the proportion of the other age categories. In Sri Lanka, percentages of children and elderly would approach equilibrium by the end of the first quarter of this century (World Bank 2012). Therefore, Sri Lanka is currently experiencing the phenomenon of the demographic dividend which is also called ‘window of opportunity’ or ‘demographic bonus/ demographic dividend’ for the next decade or so, in which the proportion of the working age population is maximised (De Silva 2013). Bloom *et al.* (2003, p. 39-42) shows three important mechanisms that produce the demographic dividend;

- Labour supply, the volume, age-distribution and spatial spread which, are demographic phenomenon and the quality and skills which, are owing to education and other factors;
- Savings; and
- Human capital, the quantum of which is a demographic factor and the exploitation of which is a function of social and cultural norms in which public and private sector enterprises, and small/family business/ farms are organised.

Asian economies strongly support the links between age-structural changes, savings and investment, and thus fiscal capacity (Higgins and Williamson 1997). Therefore, age-structural changes are not just important for those sectors that deal with social policy,

including employment and other human capital issues, but also with those who deal with more financial and fiscal aspects of planning and policy (Pool 2004).

The demographic dependency ratio is an indicator of the relationship between the population in dependent ages, such as less than 15 years and over 60 years of age, and the population in the main working ages, which is 15 to 59 years of age (De Silva 2013). The dependency ratio is usually used as an indicator of the burden of demographic dependency in a population. Support for dependents can be offered in diverse ways United Nations (2013), including familial and public transfers. The dependency ratio is thus a good preliminary approximation to review the degree of economic-demographic dependency in a society. Table 4.5 shows the child dependency, old dependency and index of ageing<sup>14</sup> from 1881-2012. The total dependency ratio in 2012 was 60.2 dependent persons for every 100 working age persons of which 40 persons were child dependents while 20 were old dependents. It is apparent that child dependency has started to decline from 81.8 in 1881 to 40.4 in 2012 while old aged dependency began to increase with a definite acceleration from the middle of the last century. As a result, the rapid of growth in old age dependency out paces the decline in young dependency. Overall, total dependency of the population is expected to grow significantly from the mid-2030s (De Silva 2007).

**Table 4.5: Sri Lanka: Child Dependency, Old Dependency and Index of Ageing, 1881- 2012**

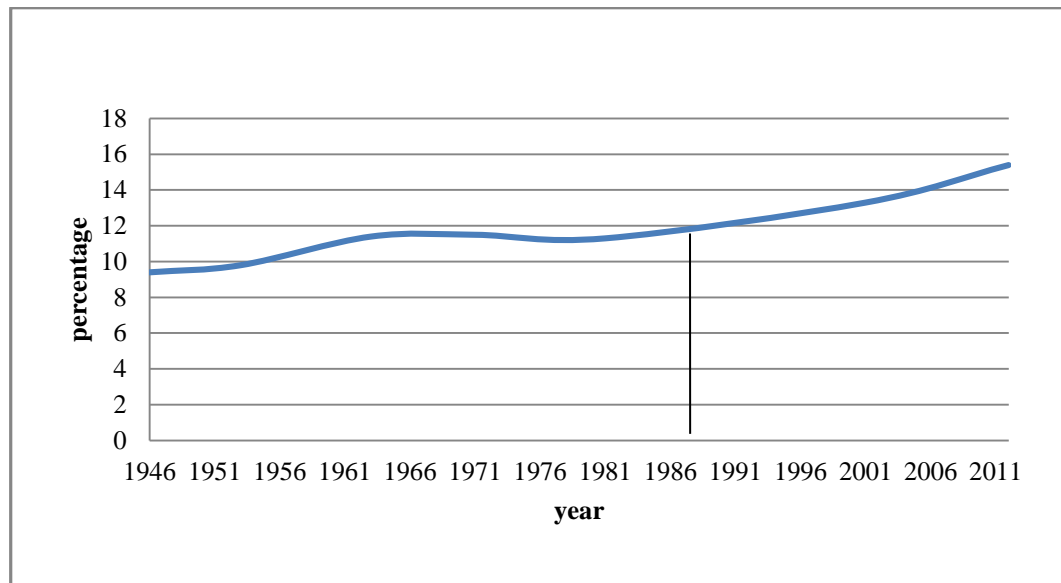
<b>Year</b>	<b>Child dependency ratio</b>	<b>Old dependency ratio</b>	<b>Index of ageing</b>
1881	81.8	5.8	7.1
1891	81.5	5.8	7.1
1901	76.6	4.9	6.4
1911	74.6	7.8	10.5
1921	70.1	7.8	11.2
1946	64.9	9.6	14.8
1953	72.3	9.8	13.5
1963	79.0	11.4	14.5
1971	71.3	11.5	16.2
1981	60.5	11.3	18.8
2001	40.7	14.3	35.1
2012	40.4	19.8	49.0

Source: Department of Census and Statistics 1983, 2002 and 2013a

<sup>14</sup> Index of ageing is an another indicator of the age structure which is (sometimes referred to as the elder-child ratio), defined as the number of people aged 60 or 65 and over per 100 children under age 15 ( Mujahid and Siddisena 2009).

Change in the elderly dependency<sup>15</sup> ratio is an excellent indicator of population ageing, especially for determining the commencement of the ageing process (United Nations 2009). It provides an indication of the dependency burden of the elderly population on the country's workforce. Figure 4.10 demonstrates that the elderly dependency ratio in Sri Lanka has risen from the 1980s.

**Figure 4.10: Sri Lanka: Elderly Dependency Ratios, 1946-2012**

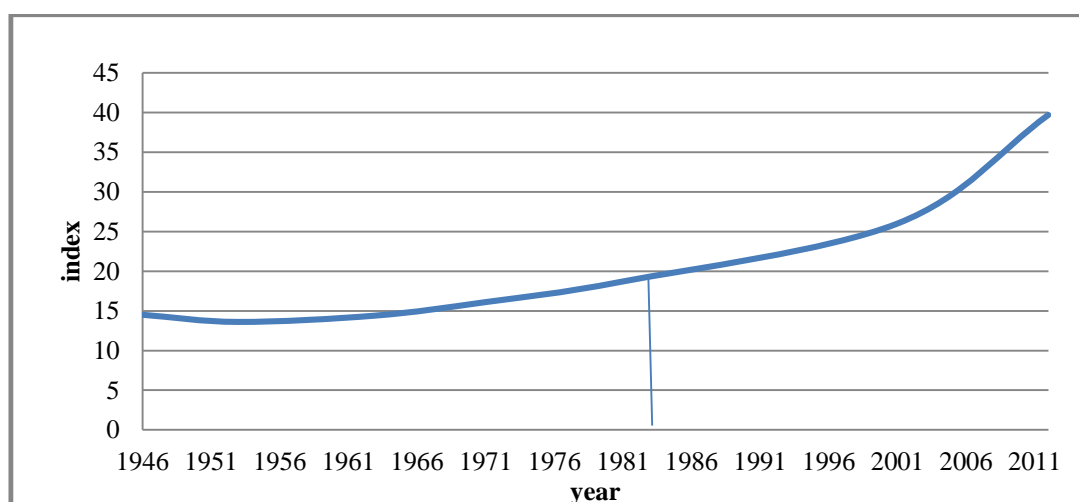


Source: Drawn from data obtained from Department of Census and Statistics (1946-2012 Census reports) from for 1991 projections from the Department of Census and Statistics

As depicted in Figure 4.11, the Index of Ageing has commenced its upward trend noticeably from the 1980s. The growing number of older persons and the reduction in young population amplify the index of ageing reflecting the change in the age structure composition of population of Sri Lanka. Most importantly, the index of ageing also represents a paradigm shift of age structure from young to old people. Projected figures indicate that the ageing index has increased more than nine times from 16.1 in 1971 to that projected 146.4 in 2031 (Siddhisena 2005). Inexorably, a much greater proportion of the old will replace this diminishing trend of the proportion of the youth in the future.

<sup>15</sup> Elderly population ratio of a particular population indicates the ratio of elderly population to the population in its labour force ages.

**Figure 4.11: Sri Lanka: Index of Ageing, 1946-2012**

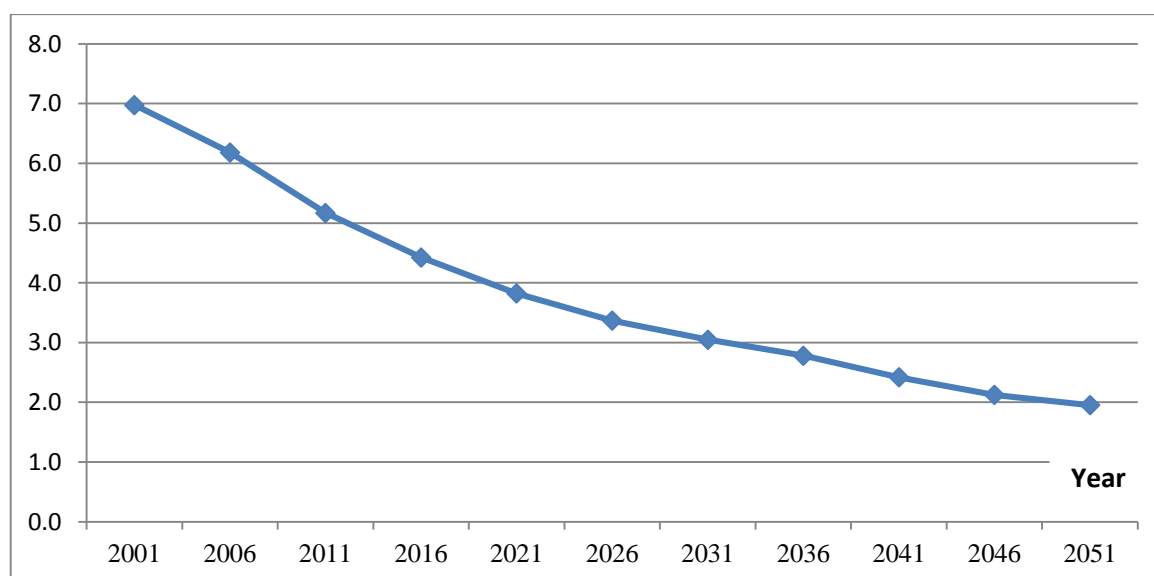


Source: For 1946-1981 census report 1981 and for 2012 Census report 2012 Department of Census and Statistics; 1986-2001 Shiddhisena 2005

## 4.6 Potential Support Ratio

The potential support ratio is another way of expressing the numerical relationship between those who are more likely to be economically productive and those who are more likely to be dependants (United Nations 2009). Figure 4.12 illustrates that in 2011 there are five working age persons per older person and this will decrease to two by 2051.

**Figure 4.12: Sri Lanka: Actual and Projected Potential Support Ratios, 2001-2051**



Source: Drawn from De Silva (2007)

During the next four decades, the potential support ratio is projected to drop substantially in all major areas, particularly in Asia, Latin America and the Caribbean (United Nations 2009). By 2050, that ratio is projected to drop to around 2 in Europe, about 3 in Latin America and the Caribbean, Northern America and Oceania, and about 4 in Asia (United Nations 2009, p. 21). In Africa, there will still be over 9 persons of working age for every person aged 65 or over by 2050 (United Nations 2001a). It is clear that Sri Lanka will have a lower potential support ratio compared to the average Asian experience but more or less equivalent to Europe. This indicates the rapidity of the ageing process in Sri Lanka, expected to take place over the next four decades.

## **4.7 Characteristics of Ageing Population**

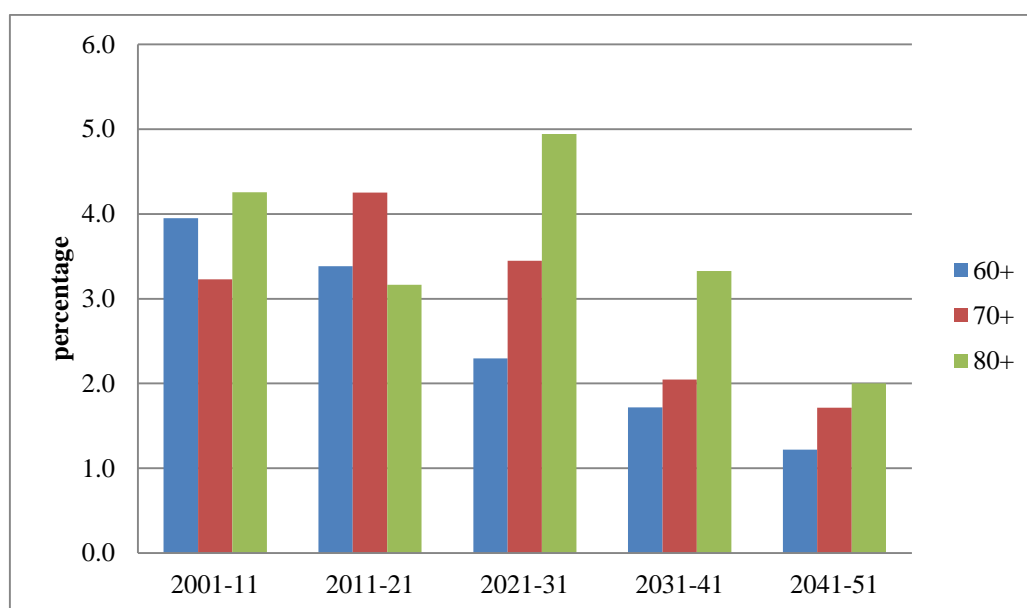
The changing characteristics of the ageing population have been very significant in developed countries (United Nations 2013, 2009), which is also expected to be the case in developing countries (Mujahid and Siddhisena 2009). The features, such as an increase in persons at oldest ages, feminisation of ageing and marital status changes, show a great need for government to pay attention to family and its' impact on the well-being of the elderly. Those who are at the oldest ages, especially widowed elderly females and those who have never married, are the most vulnerable in ageing societies. Moreover, the feminisation of ageing is also significant in most developing countries, including Sri Lanka, which has begun to witness the growth of oldest-old population after 2001 (De Silva 2010a; Siddhisena 2005). Moreover, the feminisation of ageing and changing marital status is significant and will require greater policy attention to improve the well-being of the elderly population in Sri Lanka.

### **4.7.1 Ageing of Older Persons**

A prominent aspect of the ageing process is the progressive demographic ageing within the older population itself. In most countries, irrespective of their geographic location or level of development, the population aged 80 years and over is growing faster than the younger segments of the older population (United Nations 2013, 2009). In Sri Lanka, as depicted in Figure 4.13, the average annual growth rate of the population aged 80 years and over during the 2001-2011 period was higher than other aged groups. It is expected to peak during the period 2021-2031 at almost 5 percent growth per

annum. At the global level, the average annual growth rate of the number of persons aged 80 and over, is 4 percent per year. It is currently over 50 percent higher than for the population aged 60 or over, which averages 2.6 percent per year (United Nations 2013,2009). The growth rates of all the age groups shown in Figure 4.13 are expected to decline from the third decade of this century. By 2041-2051, the growth rate of the population aged 80 and over will still be above that of the population aged 60 and over, which is expected to be 1.2 percent per year.

**Figure 4.13: Sri Lanka: Actual and Projected Average Annual Growth Rates of Population between 60+ Years and 80+ of Age, 2001-2051**



Source: Drawn from De Silva 2007

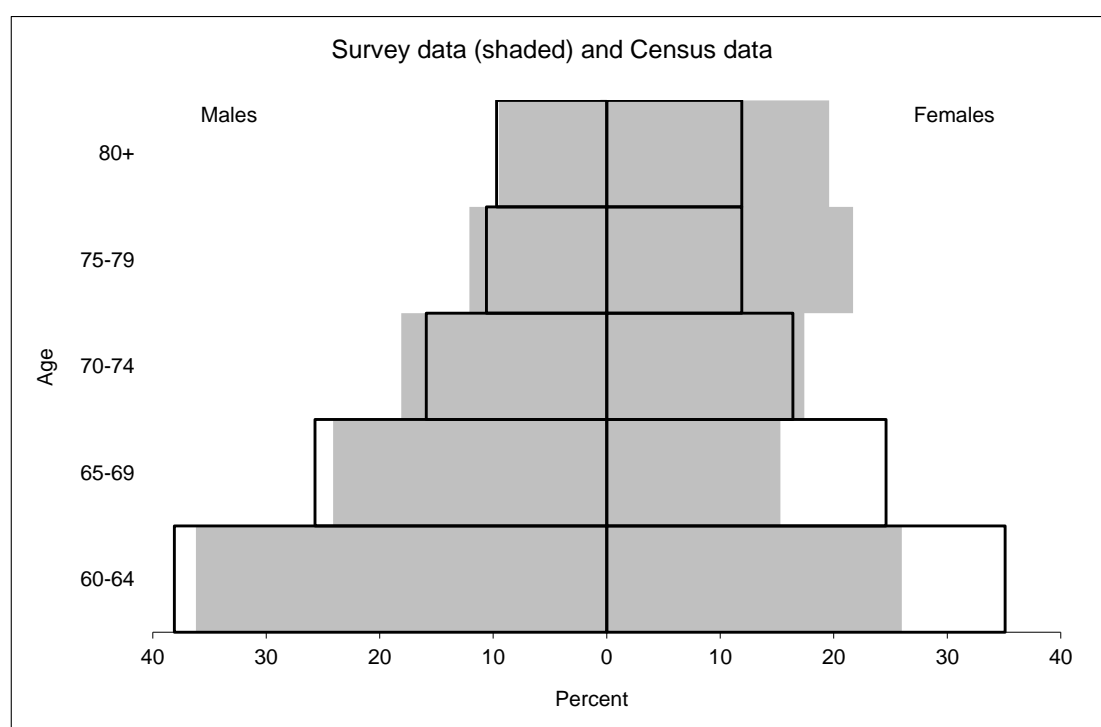
During the 2010-2015 period the global population can expect to live 20 additional years if they survive to age 60 years (United Nations 2013). This indicator varies by development region; with more developed regions, 60+ year old people expected to live on average 23 additional years, while in the less developed regions and the least developed countries, they will only live extra 19 years and 17 years, respectively (United Nations 2013, p.7). In Sri Lanka, people aged 60 lived on average 20 years in the 2000-2002 period (Gunsekare 2008). In the absence of a life table for the recent years, due to unavailability of data on deaths from the registration system, the improvement of life expectancy at old ages can be examined accumulating the number of elderly in Sri Lanka from the 2012 census data. It seems, that life expectancy at



elderly ages in Sri Lanka during recent decades has improved with more progressing to the oldest ages.

Figure 4.14 shows the age-sex distribution of the elderly in the 2012 census of Sri Lanka which resembles the sample survey data carried out in 2012 with the exception of the females in the age group 60-64. It is clear that the number of people in the older ages are increasing progressively to advanced ages even in the sample population.

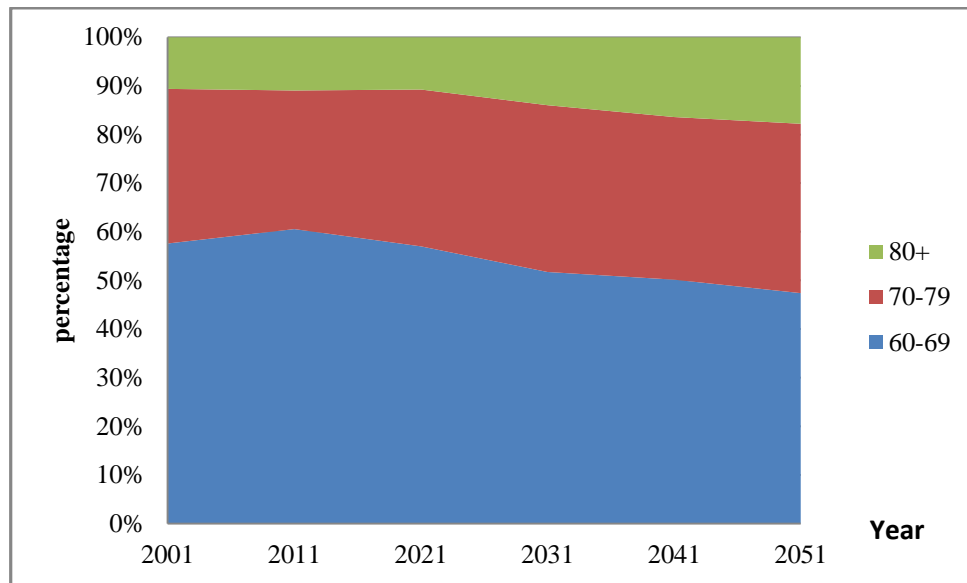
**Figure 4.14: Sri Lanka: Comparison of Census 2012 Age-sex Structure of the Elderly with Study Sample Data, 2012**



Source: Department of Census and Statistics 2013a; Elderly Survey 2012

In 2011, persons aged 80 and above numbered 282,000 which is 1.4 percent of the total population, but their share is projected to reach 5.1 percent in 2051 which is 1.08 million of the total population. By the middle of this century, about 1 in every 20 individuals will be aged 80 years and above in Sri Lanka compared to 1 in 10 in the more developed regions and about 1 in 30 in less developed regions (United Nations 2013). This suggests a faster ageing process is taking place in Sri Lanka. Figure 4.15 shows the distribution of population aged 60 years and above from 2001-2051, and it is clear that the elderly who are in the age group 60-69 will gradually decline from 2011 while the older age groups will gradually increase from 2021. The increase seems greater in the oldest age group as higher growth rates of elderly in advanced aged.

**Figure 4.15: Sri Lanka: Actual and Projected Population Aged 60 + Years, 2001-51**



Source: Drawn from De Silva (2007)

#### 4.7.2 Feminisation of Ageing

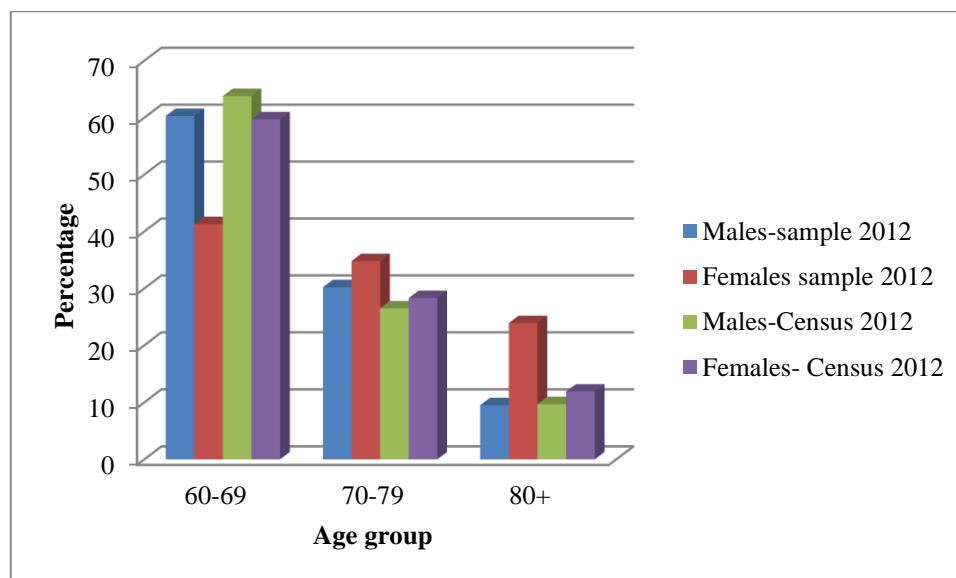
Globally on average, women live longer than men and the gender gap has been widening in recent decades (United Nations 2013, p 8). However, at this point in time in the less developed regions the gains in female life expectancy are expected to be larger than the gains for men, and this will lead to a further widening of the gender gap in mortality (World Bank 2013, p. 8). UNFPA (2012, p. 27) states,

“In 2012, for every 100 women aged 60, there were 84 men. The proportion of women rises further with age. For every 100 women aged 80 or over worldwide, there are only 61 men. The so-called “feminisation of ageing”, particularly the relatively large proportion of the “oldest old” who are women, has important implications for policy. Women and men differ on several issues that are relevant for ageing policies”.

Sri Lanka also exhibits a widening gender gap between elderly males and female, with females living longer than men. Since women's life expectancy is greater than that of men, women represent a majority at higher ages. In Sri Lanka, the sex ratio of the population aged 60 and above was 82.5 males per 100 females in 2011 (De Silva 2007). In the same year, women aged 60 and above outnumbered men of the same age by 247,200 (De Silva 2007). Assuming that past mortality trends will continue, by 2051 it is expected that there will be only 78.6 men per 100 women aged 60 and above and 62.4 men per 100 women aged 80 and above (Gunsekare 2008). Figure 4.16 clearly shows that females in Sri Lanka live more years than the males in their later ages.

Furthermore, the sex ratios at older ages between 2012 census data and sample data drawn for this study, illustrate a similar picture for both data sources by showing higher female population reaching advanced ages.

**Figure 4.16: Sri Lanka: Sex Ratio of Census 2012 Compared to Study Sample 2012**

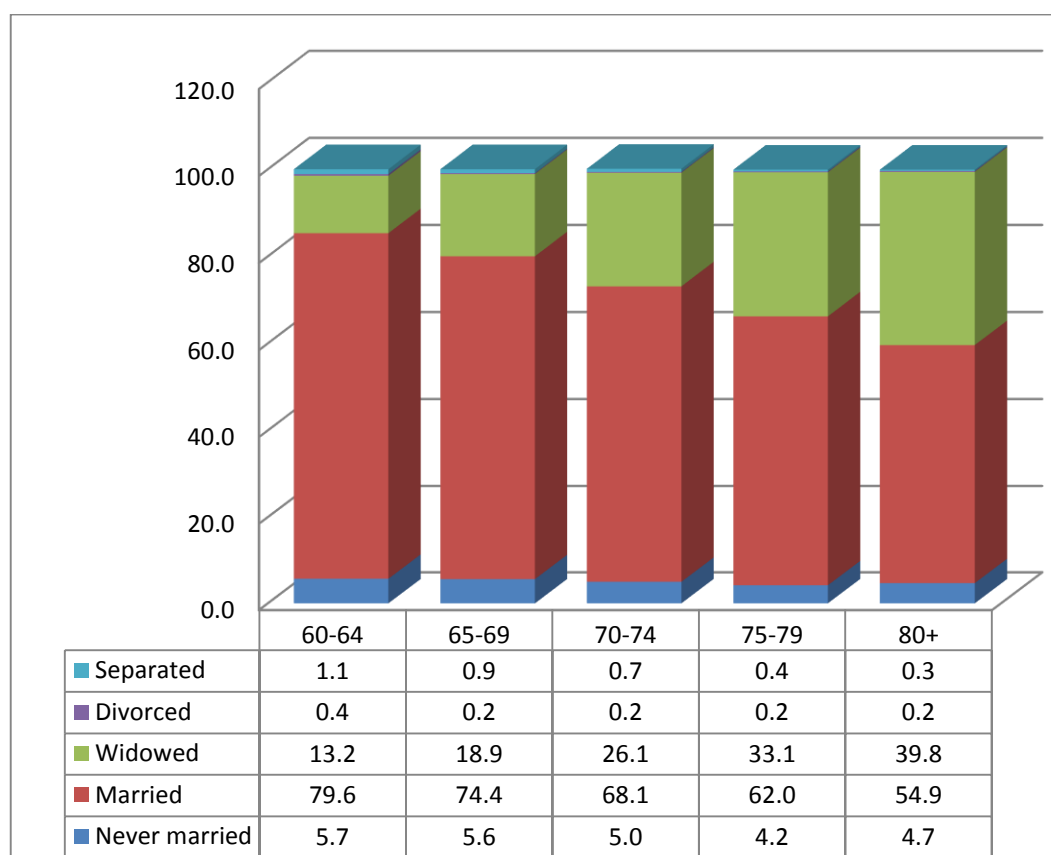


Source: Department of Census and Statistics 2013a; Survey data 2012

#### 4.7.3 Marital Status of Elderly

Marital status can strongly affect the emotional and economic well-being of older persons, often determining the living arrangements and the availability of care-givers. At a global level, the majority of older persons who are not living with a spouse have been widowed, although some have never married and others have been divorced or separated (United Nations 2013). Most often, older men are more likely to live with a spouse than older women because of a combination of factors, such as the higher life expectancy of women, the tendency of men to marry women younger than themselves, and higher re-marriage rates among older widower men than widowed women (United Nations 2009). In this context, older men are more likely than older women to receive assistance from their spouses, especially when their health deteriorates. It is apparent from Figure 4.17 that the likelihood of being a widow also increases with age, so that the majority (66 percent) of the oldest-aged people (80 years and over) are widowed, compared with only 29 percent of the younger aged.

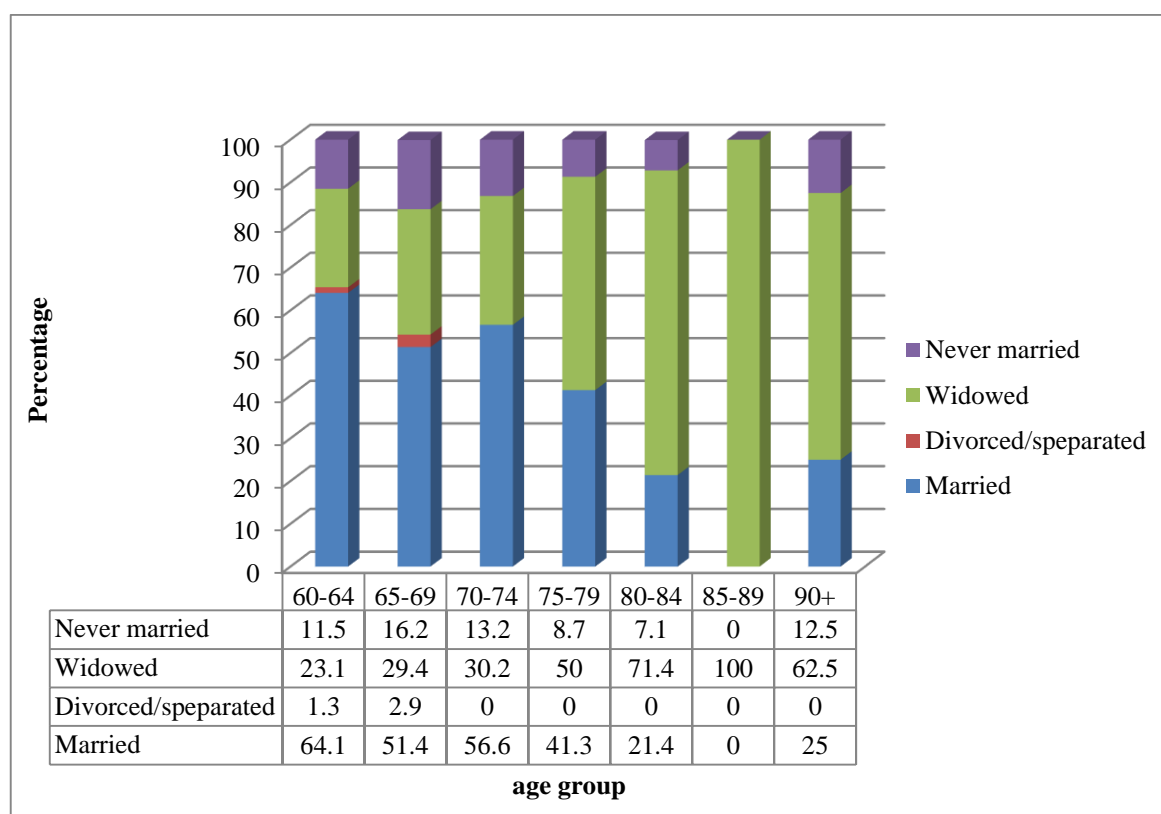
**Figure 4.17: Sri Lanka: Marital Status of the Population Aged 60+ Years, 2012**



Source: Department of Census and Statistics 2013a

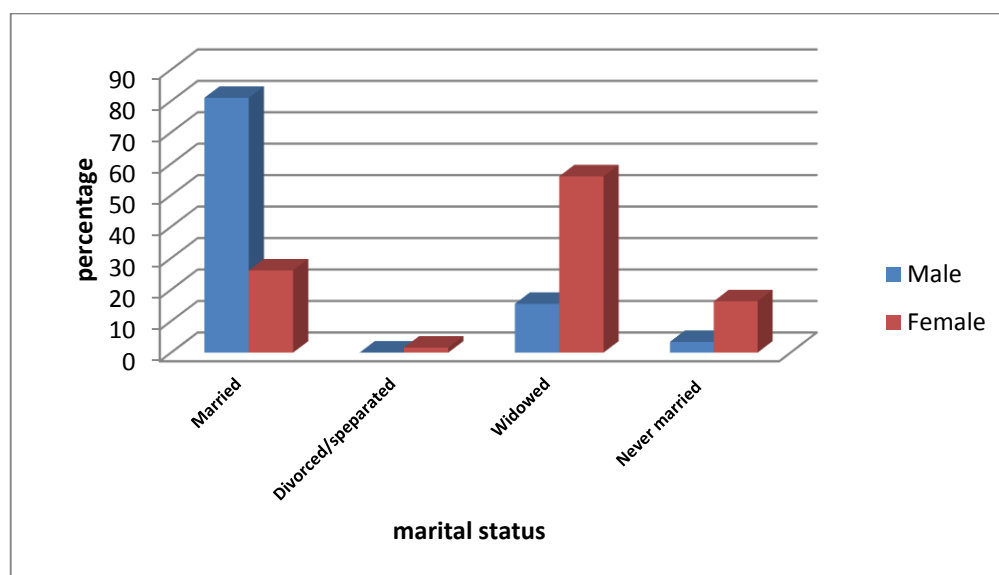
The sample data also reveal the same situation as depicted in Figure 4.18. It shows an increasing trend in the widowhood status of the aged similar to the general population. Some 40.3 percent of the elderly who are above the age 60 in 2012 were found to be widowed from the sample survey data. Figure 4.19 demonstrates the prevalence of a higher number of female elderly widows for the Sri Lankan elderly population in 2012. This is also a reflection of higher life expectancy for females than for males in Sri Lanka at elderly ages. These changes in marital status of the elderly are likely to influence living arrangements, of the elderly discussed in chapter 6.

**Figure 4.18: Sri Lanka: Marital Status of the Elderly by Age, Study Sample 2012**



Source: Elderly Survey 2012, N= 300

**Figure 4.19: Sri Lanka: Marital Status of the Elderly by Sex, Study Sample 2012**



Source: Elderly Survey 2012, N= 300

## **4.8 Conclusion**

Sri Lanka has experienced a gradual process of ageing of its' population during the past 50 years and the intensity of ageing is expected to increase at a faster rate during the next 50 years. Therefore, an interesting feature of demographic transition in the next half century will be the rapid ageing process and growth in the aged at advanced ages. Such a rapid evolution of ageing could pose serious challenges for the country in the immediate future. Various ageing indices and measures used in the analysis confirm that the onset of population ageing commenced in Sri Lanka in the 1980s, which has been accompanied by changes in the characteristics of aged population. The increasing proportion of the oldest-age group, a rising number of women at advanced ages and changes in the marital status of elderly need greater attention by policy makers because they are more vulnerable than other segments of the population. Furthermore, this analysis has shown that ageing has been progressively a gendered experience in the country. All these changes can have a significant impact on the role of the family because of the changing demography of the family, as well as the changing nature of the society, as modernisation proceeds. Therefore, the next chapter examines the factors influencing the changing role of the family in Sri Lanka.

## CHAPTER 5

### THE CHANGING ROLE OF THE FAMILY IN SRI LANKA

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#### 5.1 Introduction

The main objective of this chapter is to examine the changing role of the family in Sri Lanka. Family change has been the central focus in demographic literature for some time because the family has the responsibility for raising children, caring for individuals as they become old and ensuring the welfare of individual members (Dirgha and Axinn 2006; Thornton and Fricke 1987). The influence of social and economic change on the family has been the main focus of scholars in the past, but the family unit has undergone substantial changes in recent years (Thornton 2013, 2001; Michael *et al.* 1980; Shorter 1975; Goode 1963; Ogburn and Nimkoff 1955). As a result, many social observers have been interested in family change and its consequences (Durkheim 2014; Murphy 2010; Dirgha and Axinn 2006; Van de Kaa 1996; Becker *et al.* 1991).

Universally, family has undergone major changes over the years (World Bank 2008), and in this regard, Sri Lanka is not an exception (De Silva 2005). One of the major changes observed was the changing nature of the family from a large family structure inclusive of the extended family, to a smaller family structure such as nuclear families (Dirgha and Axinn 2006). This profound change in the family organisation was a result of a combination of demographic, socio-economic and cultural forces (Yang 2011). Furthermore, the intergenerational inequalities of inter- and intra-family relationships emerge as a consequence to the vast changes in demography, society and economics in the world (Kinsella and Philips 2005). It has also been suggested that the changing role of the family can be better understood by examining the changing relationship between generations (Suitor *et al.* 2011). Therefore, this chapter primarily focuses upon the nature of family change and the family transformation trend. It further concentrates on the intergenerational gap emerging as a consequence of the changing role of the family in Sri Lanka.

#### 5.2 Understanding the Role of the Family

Family is the primary group where most individuals spend the majority of their time and essentially, all persons spend at least a major part of their lives (Thornton 2013;

Goode 1963). Raising children, caring for individuals as they age, generally pursuing the welfare of their individual members, has been the principle objective of Family (Dirgha and Axinn 2006).

Focusing on the role of the family requires a basic understanding of what is meant by the concept “family.” Families are defined as complex structures consisting of an interdependent group of individuals who (1) have a shared sense of history; (2) share emotional ties to one another; and (3) devise strategies for meeting the needs of individual family members and the group as a whole (Anderson and Sabatelli 2011,p. 6).

Furthermore, family is the basic social organisation of the society since it bares the fundamental activities of society such as socialisation, consumption, reproduction; production and distribution, co-residence and transmission of property (Demos 2000; Thornton and Fricke 1987; Caldwell 1982; Ogburn and Nimkoff 1955). In addition, the family is generally recognised as an element of a broader kinship network that links ancestors and the descendants of a person (Nam 2004). Thornton and Fricke (1987, p. 748-749) provide an excellent overview of the family system:

“The kinship groups’ activities generally pooled resources and responsibilities and participated in a specialisation and division of labour among groups. These features required coordination among the activities and goals of individual family members and involved the integration of individual life courses with the life cycle of the family group as a whole. Kinship relations also served as vital linkages in binding individual family groups into larger communities. The stability of family system from one generation to the next was maintained through complex relationships unifying production, distribution, consumption, reproduction, socialisation, and transmission of property within and across kinship groups”.

According to Thornton and Fricke (1987), there is a general interdisciplinary agreement about the centrality of the family to social structure throughout the world. Nevertheless the search for a cross cultural working definition of this institution is difficult, because of the requirement to differentiate between the arrangements or forms of family and household units, the activities they carry out, as well as the variations in family composition and activity throughout the world (Levi-Strauss 1984; Wilk *et al.* 1984; Bender 1967). Similarly, Netting *et al.* 1984 mention that family is not necessarily a localised social network based on culturally recognised biological or marital relationships. In addition, Thornton and Fricke (1987) stated that the intensity and type of associations amongst individuals will differ with distance and specific kin status.



‘Household’ is usually defined as a co-resident domestic group while the family consists of those household members who also share kinship relations to one another (Fricke 1987). ‘Family’ is defined as the elementary unit of the society while household adds kinfolk, servants, lodgers and attached persons of all kinds when present (Laslett 1970). The household also can be regarded as society’s basic socio-economic unit (Anderson and Sabatelli 2011; Netting *et al.* 1984). Most published statistics on the family are based on census or household survey questions and responses (Department of Census and Statistics 2013b; De Silva 2005). Nonetheless, the identification of non-residential members of family is troublesome and hard to obtain as those who may be considered family members but who live at a different address are usually not included in demographic data (Department of Census and Statistics 2013b). It may be even the case if they live just next door. Also as a result of the rules of census and survey of residence, certain members of the family who live in other geographical locations may not be taken into account, such as college students, workers etc. In other words, the definition of the family is mainly governed by the principle of household (Rapp 1979).

In fact, some persons who meet the customary demographic classification of the family may have little association with other family members in the same dwelling. For example, they may have diverse patterns of work, sleep and additional activities, and they may perhaps not converse by telephone or post. Their inclusion in the household is pro-forma and based only on the assumed definition of the family (Anderson and Sabatelli 2011). This nurtures questions regarding limitations of the standard demographic definition of the family and its significance in understanding how family arrangements might change with time. Rapp (1979, p. 177) states,

“It is through their commitment to the concept of family that people are recruited to the material relations of the households. Because people accept the meaningfulness of family, they enter in to relations of production, reproduction and consumption with one another. They marry, beget children, work to support dependents, accumulate, transmit, and inherit cultural and material resources. In all these activities the concept of family both reflects and masks the realities of household formation and sustenance”.

It is therefore apparent that the definition of the family differs from society to society; however, key roles and responsibilities remain constant. In the context of Sri Lanka, the concept of the family and household shows similarities (Abeykoon *et al.* 2008). According to the Department of Census and Statistics (2013, p.4) the definition of household is as follows:

“A household may be a one-person household or a multi-person household. A one-person household is a unit where a person lives by himself and makes separate provision for his food, either cooking himself or purchasing. A multi person household is a group of two or more persons who lives together and has a common arrangement for cooking and partaking food. Boarders and servants who share the meals and housing facilities with other members of the household are also considered as members of the household”.

This suggests that a household can have one or more than one family living together with one or more non-related persons, or can consist entirely of non-related persons. However, a family typically will not comprise more than one household (Abeykoon *et al.* 2008). By considering all these intricacies of the nature of the family and its role, this study selects the household as the basic unit for the field survey and different family types will be identified within the household.

### **5.3 Family Transformation**

Since the 1960s, family structure and family forms have changed considerably in developed countries (Uhlendorff *et al.* 2011), which has also occurred later in developing countries. In the twentieth century, family structure, functions and values began to experience an unprecedented change in Asia and the Pacific (United Nations 2008; De Silva 2005). The impact of globalisation, urbanisation, migration and social transformation are seen as major contributory factors (Uhlendorff *et al.* 2011; United Nations 2008). In Sri Lanka, socio-economic changes, along with migration and urbanisation, have made a significant impact on the family which has undergone a considerable transformation during the last five decades (Abeykoon *et al.* 2008; De Silva 2005; Dissanayake 1995). However, an understanding of the changing role of the family needs a narrative of vital characteristics of historical family arrangements, the forces of change and a description of how these forces affect particular facets of societal life (Thorton and Frick 1987, p. 749). Both western and non-western societies have experienced changes in family patterns during the recent past (Van de Kaa 1996). Family change in non-Western countries like Sri Lanka has been influenced by Western ideologies and beliefs in behaviours and ideals (Van de Kaa 1996; Dissanayake 1995; Caldwell 1982; Freedman 1979).

#### **5.3.1 Differences between Traditional Family and Modern Family**

Family transformation occurs when traditional forms of the family are being transformed into the modern form that exists today in many countries, including Sri

Lanka (United Nations 2008; De Silva 2005; Dissanayake 1995; Puvanarajan 1994). Various scholars have examined the characteristics of traditional and modern families because family transformation can be observed as a result of the changes occurring to those characteristics. Harper (2003, p. 155) states that,

“...social mores accompany family and social lives are undergoing continued transformation. The family mode of social organisation, where by kin groups pooled their resources and related to the community as an intact unit, has altered as ideological, economic and social changes have shifted the locus of control away from the family towards the individual or other social institution”.

It has also been claimed that the most change from traditional to modern family is a move from the emotionally extended to the emotionally nucleated family (Hugo 2002). Hugo (2002, p. 15-16) states,

“..this does not refer to the residential arrangements of families but the way in which they function and the primary loyalties and obligations felt by family members. In the traditional extended family system, primary loyalties are upward to parents so that the patriarch controls much of the lives of their families, allocates their work tasks, collects all the family’s earnings and decides on marriage partners, among others. The transition to the emotional nucleation of families sees primary loyalties and obligations swing towards one’s spouse and children”.

Development of the modified extended family is a recent phenomenon which has developed as a consequence of industrialisation. Literature reveals that the modified extended family is one in which adult children leave their parental household upon marriage, but regularly engage in common matters with parents and other kin (Schmeeckle *et al.* 2004; Gordon 1972).

The traditional family has changed its’ characteristics composition and function towards a different type of family in modern society. Table 5.1 shows the differences between the traditional family and modern family. The traditional and modern family are significantly differ as traditional family had large number of people, male oriented, main production unit and elderly people were respected by the family and society. In contrast, the modern family has fewer members comprising with immediate family members, the life styles of the modern families have changed, the main income is generated from external sources, education has become priority and more females are employed as a result the respect to the elderly has gradually eroded.

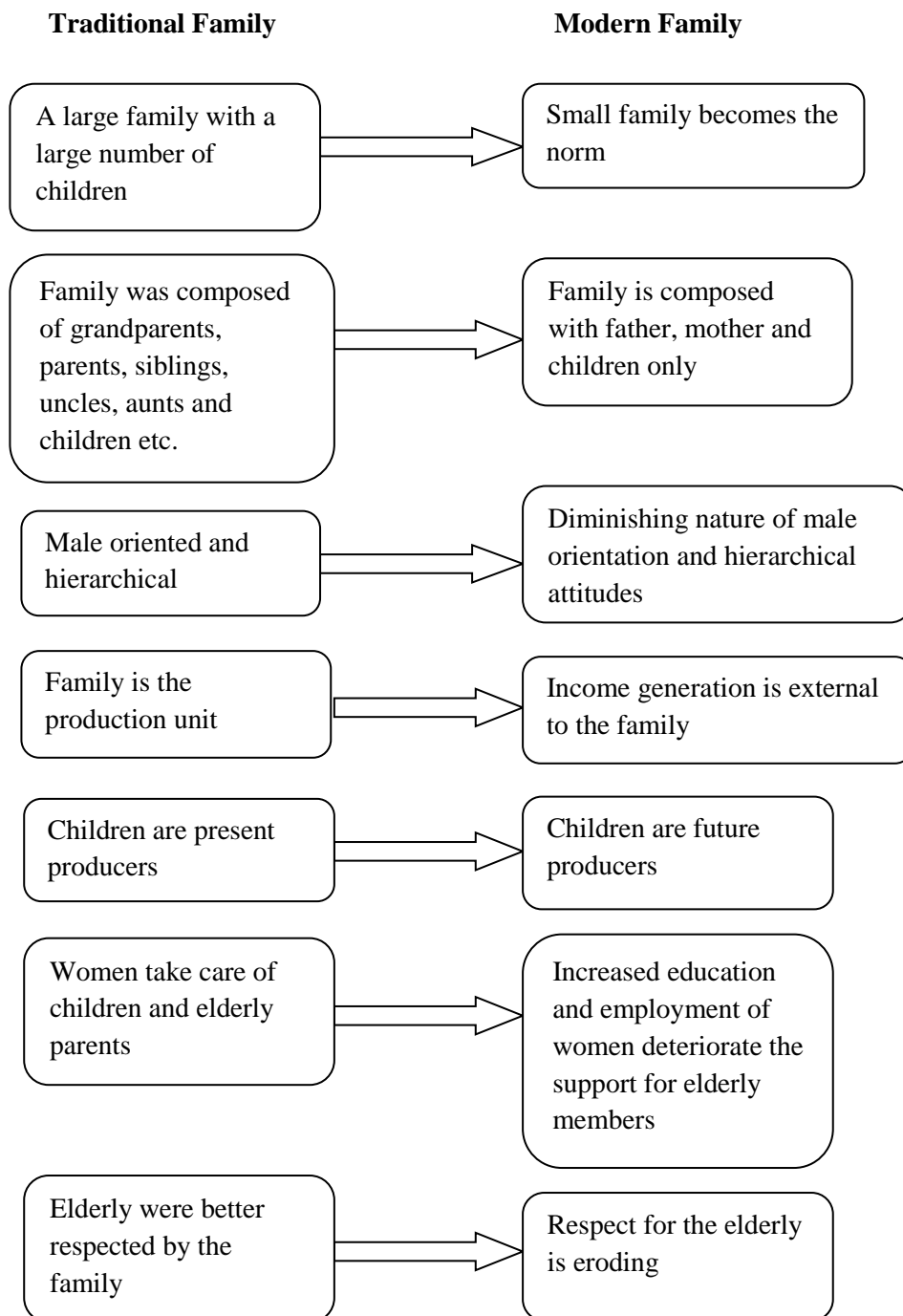
**Table 5.1: Comparison of Traditional Family and Modern Family**

Traditional Family	Modern Family
Size/Type	
In traditional society, a large family with large number of children was the norm. Number of family members and relationships were valued because of potential economic and social benefits. Therefore, the extended Families/ Joint families/ were in existence in the society (Caldwell 2006;Dissanayake 1995; De Silva 1994).	In the modern society, the small family becomes the norm of the society; the policies were also introduced to reduce the growth of population. Therefore, nuclear family replaced the extended family. Further, with the modernisation process new family types (living arrangements) such as co-habitation, living apart together, single parent families, female headed households etc, are emerging in the society (Roopnarine and Gielen 2005;Kinsella and Phillips 2005; De Silva 2005).
Composition	
In the traditional society, family was composed with large number of members such as grandparents, parents, siblings, uncles, aunts, children etc. (Harper 2003)	In the modern society, the majority of the families composed with mother, father and children. Although some families live with their elderly parents, the moral nuclear family system has created individualism and individual achievement with their immediate family members (Roopnarine and Gielen 2005). In the modern family there are several generation instead of large number of members in the family( Harper 2003)
Functions of the Family	
<p>Male oriented and hierarchical; each family member has set of tasks in the family differentiated by age and gender (Ariyapala 1956)</p> <p>Family is the production unit where work is directed and rewarded by relatives (Mustin 1988, p. 36)</p> <p>All the family members including women, children were valued because of potential economic and social benefit to the family (Caldwell 1987).</p> <p>Women take care of little children and elderly parents (Bulatao and Fawcett 1983)</p> <p>Elderly were more respected in the traditional family (Caldwell 2006; Amarabandu 2004; Hugo 1997).</p>	<p>Diminishing nature of the male oriented and hierarchical attitudes (Dhirga and Axin 2006)</p> <p>No longer serve as primary production unit; income generating employment, supervision, and rewards have become external to the family (Mustin 1988)</p> <p>With the changing role of the family, the children are considered as future producers not the present producers in the family (Dissanayake 1995).</p> <p>Female education has increased the status of the women within the family (Dissanayake 1995) and increased labour force participation deteriorates the support for the elderly members (Siddhisena 2005).</p> <p>Position of the elderly is gradually eroding in some extent (World Bank 2008; NSE 2004; Silva 2004).</p>

Sources: World Bank 2008; Caldwell *et al.* 2006; Dirgha and Axinn 2006; Kinsella and Phillips 2005; Roopnarine and Gielen 2005; De Silva 2005,1994; Siddhisena 2005; Silva 2004; Amarabandu 2004; NSE 2004; Harper 2003; Hugo 1997; Dissanayake 1995; Hare-Mustin 1988; Caldwell and Caldwell 1987; Bulatao and Fawcett 1983; Ariyapala 1956.

Figure 5.1 visualises the ‘Family Transformation’ from its traditional form to modern manifestation.

**Figure 5.1: Family Transformation**



Source: Table 5.1

Families in the traditional society may engage in functional extendedness, living nearby and offering mutual support (Tulananda and Roopnarine 2001). In Sri Lanka, traditional families had many members, and the relationship with members depended on gender

and age (Leach 1961). It is also noted that male headed patriarchal norms dominated inter- and intra-familial relationships in Sri Lanka (Ariyapala 1956). Although some children of the family lived separately but close to the main family, inter- and intra-family decisions were still made by the elders of the family. Elderly male and the adult male child were the most respected by other family members and thus their influence on family decisions was significant (Leach 1961). Nevertheless, traditional laws have given women equal access to assets and promoted family relations (Goonasekare 1980). Men and women worked side by side in the subsistence economy and the lines of differentiation between domestic economic activities were distorted (Jayaweera 1990). However, family ideology influenced perception of gender roles, particularly that women's work as mothers made them responsible for child care, household tasks and elderly care irrespective of their economic assistance in the family economy (Jayaweera 1990). In summary, the role of the family has changed due to several reasons when it changes into the modern family from its previous traditional form:

- The number of children of the family declines while the number of living generations increases (Harper 2006; World Bank 2008);
- Emergence of different types of living arrangements instead of the traditional extended family arrangements (Panigrahi 2010; Roopnarine and Gielen 2005; Silva 2004);
- Advances in education, information technology, the influence of media and changing life styles, including parental ambitions for the best preferred education for their children in the competitive world (United Nations 2007a, p.6);
- Migration of younger generations to the cities and foreign countries has led to the disintegration of the family system (United Nations 2007a, p.6);
- Changing values and expectations of women, their concepts of privacy and space, desire not to be encumbered by caring responsibilities of older people for long periods (United Nations 2007a, p.6); and
- The small family norm by people reduces the availability of care-givers in a larger number of families; Daughters too are fully occupied, pursuing their educational or work careers (United Nations 2007a, p.6)

This study is in an advantaged position to find out whether the Sri Lankan family has transformed from its traditional type to modern type, given that the survey of the elderly asked whether there had been a change in family type between their parent's generation and also between their adult children's generation. It is important to note here that the elderly parents who were observed in the survey in 2012 were born before 1952 and there appeared to be not much change in family types between the elderly and their parents' generation. However, a substantial change in the family occurred between the

elderly and their adult children's generation. Therefore, it is clear from this study that a substantial transformation of the family has occurred during the past few decades.

### 5.3.2 Changing Status of the Family: Composition and Structure

Abeykoon *et al.* (2008) has shown that the ways in which Sri Lankans are grouping themselves into families have undergone significant changes during the past decade. This is a function of major shifts in the demographic, economic and social processes which impinge upon the size structure and functioning of Sri Lankan families (Silva 2004). When studying family transformation in Sri Lanka, it is important to examine the changing status of the family and its compositional and structural changes. An emerging feature in the modern family system is the changing attitude towards the value of children (Dissanayake 1995; Caldwell 1982). In traditional societies, where human labour was a source of strength to the family, more children were preferred (Dissanayake 1995). However, as the economic contribution from children in a family decreased, partly because of moving away from agriculture, the requirement for large numbers of children also decreased. Improvements in health care and child survival also contributed to this change. In this context, the stress was on the quality rather than the quantity, of children (Dissanayake 1995). However, changes in fertility have also contributed to changes in family structure in Sri Lanka (World Bank 2012). Considerable changes in marriage have also played a significant role in the destruction of the old family structure through late marriage and low fertility rates (De Silva 2005).

Therefore, household size and the structure of the Sri Lankan family have been subjected to significant changes over the past couple of decades. Most importantly, the household size of the urban, rural and estate sectors have begun to converge to a similar size from the mid-1990s as portrayed in Table 5.2. Consequently, the average household size in Sri Lanka has declined to 3.8 by 2012 from 5.6 in 1963.

**Table 5.2: Sri Lanka: Average Household Size by Sector, 1963- 2012**

Sector	1963	1973	1981/82	1996/7	2003/4	2006/7	2009/10	2012
Urban	6.0	5.8	5.5	4.9	4.4	4.3	4.2	4.0
Rural	5.7	5.6	5.2	4.6	4.3	4.0	3.9	3.8
Estate	5.8	5.2	4.8	4.7	4.6	4.2	4.3	4.1
Total	5.6	5.6	5.2	4.6	4.3	4.1	4.0	3.8

Source: Abeykoon *et al* (2008 p.6), Department of Census and Statistics 2013 p. iv

In Asian settings, families with a comparatively large number of members have been the norm but this has declined over the past few decades (De Silva 2005). Sri Lanka has experienced a substantial decline in the percentage of households with 5 or more members from 52.6 percent in 1993 to 46.2 percent in 2012 (Department of Census and Statistics 2013b). However, those families with five or more members are still relatively large in the global perspective. The decline in dimensions of the family can be credited to economic problems, education costs and expectations of a higher standard of living (Dissanayake 2012).

### ***Increasing trend in female-headed households***

The vital change found in family structure is the increasing number of female-headed households. These households are where a female adult member is the one responsible for the care and organisation of the household, or she is selected as the head of the household by the other members of the household (Department of Census and Statistics 2013b, p.9). The Household Income and Expenditure Survey 2012/2013 estimated that 1.2 million households were female-headed households in Sri Lanka with a majority of the women in aged 40-59 years, and more than 50 percent were widows. However, the female-headed households aged above 60 years are also significant as shown in Table 5.3. The growth of the female-headed households is one of the new trends in family structure observed in Sri Lanka. It shows that the proportion of female-headed households increases as age advances by illustrating the highest growth in the ages 60 and above. Female-headed households in the rural sector are higher in upper ages than the other two sectors.

**Table 5.3: Sri Lanka: Female Headed Households by Age Group and Sector, 2012**

<b>Sector</b>	<b>Age group</b>			<b>Total</b>
	<b>Less than 40 (percent)</b>	<b>40-59 (percent)</b>	<b>60 and over (percent)</b>	
Sri Lanka	19.7	41.6	38.6	100
Urban	18.9	44.3	36.7	100
Rural	20.3	40.1	39.6	100
Estate	12.7	56.9	30.4	100

Source: Department of Census and Statistics 2013b, p.10



### ***Changes in the age-composition***

An important change in the structure of the family can be traced from its age composition. As discussed in chapter four, due to primarily decrease in fertility and an increase in longevity, the average married couple now has more living parents than children (Harper 2003). As a result of declining fertility with the onset of the fertility transition from 1960, the number of Sri Lankan children is expected to decline from 4,922,400 in 2001 to an estimated 3,149,300 in 2051, a 56.3 percent decline during the first half of the 21<sup>st</sup> century (Department of Census and Statistics 2009). Hence, the proportion of children to total population is projected to decline from 26.3 in 2001 to 14.9 percent in 2051 (Department of Census and Statistics 2009).

According to the 2001 census, there were 5.3 million adolescents and youth which comprised 28 percent of the total population (Department of Census and Statistics 2002). In 2012, they amounted to 6.3 million and consisted of 31.2 percent of the total population (Department of Census and Statistics 2013a). The population projection data prepared by De Silva (2007) reveals that the population in the youth categories is expected to decline during this century. Changes in age categories of the youth can have major implications for Sri Lanka's family structure, as they are the group who enter into the adult children cohort.

There is an increasing ageing population in the country, and sustained decline of fertility observed after 1960 has significantly affected the age structure to gradually move away from its broad base, where the majority were in the younger age groups due to the high fertility that prevailed before the 1960s. When the Sri Lankan population of 1981, 2001 and 2012 are compared, there is a gradual reduction of population in the child age category and a dramatic increase in the old age category. Increased life expectancies during the past few decades in Sri Lanka have increased the survival chances of the elderly as well. Moreover, female life expectancy is higher than for males. These changes are likely to influence the family structure and its functioning, coupled with the demographic and socio-economic changes that have occurred in Sri Lanka since post-independence, which have shifted the balance between generations.

As life expectancy increases in most nations, including Sri Lanka, it is likely that several generations are alive at the same time. In more developed countries, this is manifested as a "beanpole family," a vertical extension of family structure characterised

by more generation but smaller ones (Harper 2003; NIA *et al.* 2007, p. 16). NIA *et al.* 2007, p. 16 states,

“As mortality rates continue to improve, more people in their 50s and 60s are likely to have surviving parents, aunts, and uncles. Consequently, more children will know their grandparents and even their great-grandparents, especially their great-grandmothers. There is no historical precedent for a majority of middle-aged and older adults having living parents”.

Demographic trends of family structure in Sri Lanka also reveal the emergence of families with multiple generations and fewer children in the family.

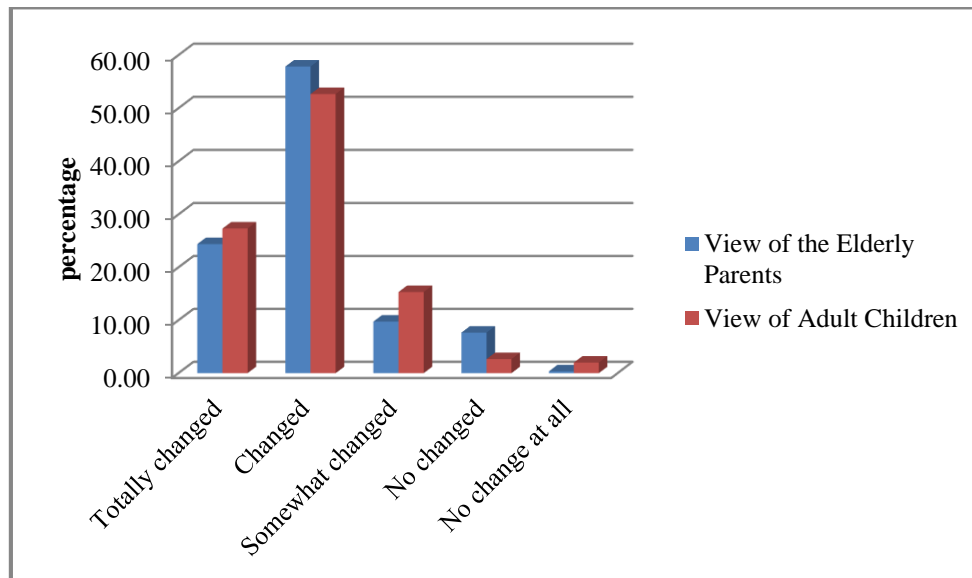
## **5.4 Factors Influencing the Changing Role of the Family**

### **5.4.1 Major Factors of Change: Views of the Elderly Generation and Adult Children Generation**

One of the important ways of establishing whether there have been any changes in the nature and role of the family is to obtain the perception from two generations, elderly parents and adult children. The elderly who have been subjected to such changes over at least three generations: their parent, their own and their children and possibly their grandchildren. Adult children who are living independently have experienced the family change in their own families. In this study, the elderly sample who are 60 years and above consisted of 300 households and the adult children sample below 60 years age who lived independently represented 150 households.

Both the elderly and adult children generation in the samples are of the view that the family role has changed from the traditional family as depicted in Figure 5.2. It clearly shows that more than 90 percent of both elderly generation and adult children generation are in the opinion that family role have significantly changed from traditional to modern family.

**Figure 5.2: Changing Role of the Traditional and Modern Family: View of the Elderly Parents and Adult Children**



Source: Elderly Survey 2012 (N= 300) and Adult Children Survey (N=150)

The factors that caused the role of the family to change and information was gathered from these two generation separately in order to observe whether there are any similarities in their perceptions. Table 5.4 further demonstrates that a combination of factors have contributed to such family role changes. Among them, *decline in the size of the family, changes in the relationship between parents and children, and changes in the economy of the family* were found to have the most impact on the changing the role of the family, which in turn has created inequalities between the elderly and their adult children. The field study confirmed this situation as both elderly parents and adult children viewed that role of the traditional family and modern family has changed.

**Table 5.4: Perceived Reasons for Family Change by the Elderly Parents and Adult Children Generations**

<b>Elderly Parent Generation</b>		
<b>Reason</b>	<b>Number</b>	<b>Percentage</b>
Size of the family has changed	100	19.0
Relationship between parents and children have changed	90	17.1
Type of economy of the family has changed	90	17.1
Relationship among children have changed	73	13.9
Family type has changed from extended to nuclear	58	11.0
Education level of parents and children have changed	57	10.9
Status of the women in the family has changed	43	8.2
Other	14	2.7
<b>Adult Children Generation</b>		
<b>Reason</b>	<b>Number</b>	<b>Percentage</b>
Value of the family has changed	59	26.5
Relationship between family members have changed	51	22.9
Family type has changed from extended to nuclear	45	20.2
Overall family has changed	46	20.6
Role of the mother/father has changed	16	7.2
Other	6	2.7

Source: Elderly Survey 2012 and Adult Children Survey 2012 - (Multiple Responses)

#### **5.4.2 Education including Female Education as Factor of Change**

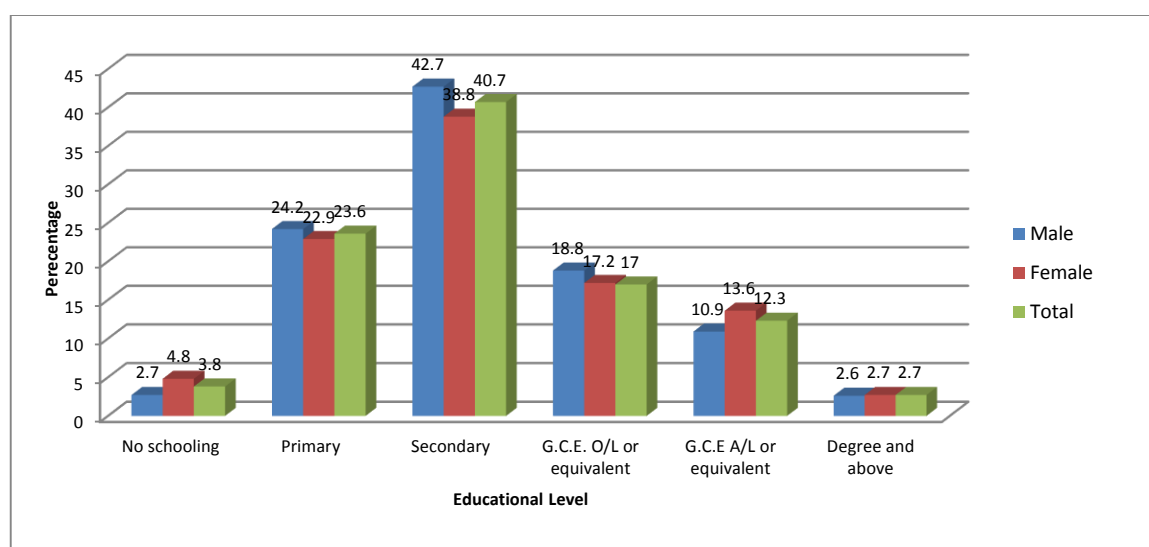
It was found in the field survey that educational improvements are a major factor that brought about family change in Sri Lanka. Education has played a major role in changing the demographics and socio-economic status of Sri Lanka. Over the past 50 years, Sri Lanka has made important gains in its education sector, reaching near universal literacy and primary school enrolment rates (CUTS 2002, p. 14). However, the increasing level of education of females has had an impact on societal development. Although the role of women in the traditional family is limited to child bearing and household work, increased female education after the 1940s has had a substantial impact on changing their roles within the family (Dissanayake 1995). Table 5.5 shows the literacy rate of males and females, and both have increased with improved school enrolments in the post-independent Sri Lanka. It is seen that the gap between literacy rates of males and females has been gradually declining from the 1950s to only 1.2 percentage point difference in 2012.

**Table 5.5: Sri Lanka: Literacy Rates by Sex, 1881-2012**

Census Year	Both Sexes	Male	Female	Differences between male and Female
1881	17.4	29.8	3.1	26.7
1891	21.7	36.1	5.3	30.8
1901	26.4	42.0	8.5	33.5
1911	31.0	47.2	12.5	34.7
1921	39.9	56.3	21.2	35.1
1946	57.8	70.1	43.8	26.3
1953	65.4	75.9	53.6	22.3
1963	77.1	85.8	67.5	18.3
1971	78.5	85.6	70.9	14.7
1981	87.2	91.1	83.2	7.9
2010	91.9	93.2	90.8	2.4
2012	95.6	96.8	94.6	1.2

Source: Department of Census and Statistics 1983, 2013a; General Report of Central Bank 2012, Sri Lanka

Recent data from the 2012 census of Sri Lanka shows that there is no difference between males and females in terms of the educational level for all education types (Figure 5.3). This suggests that female education has achieved the same educational status as their male counterparts by 2012. However, a larger proportion of people are observed in the primary, secondary and post-secondary educational categories. It is also important to note that the no schooling category is minimal in Sri Lanka, but slightly higher for females.

**Figure 5.3: Sri Lanka: Population (5 years and over) by Educational Level, 2012**

Source: Department of Census and Statistics 2013a

Education and fertility have a strong relationship (Dissanayake 1995; Caldwell 1982). It has been shown that fertility decline in Sri Lanka occurred due to the combined effect of substantial social development and the effective implementation of family planning programmes (World Bank 2012; Dissanayake 1995). The increased level of female education has significantly changed the attitudes towards large families. The gender gap in literacy levels which was as wide as 30 percent in 1901 has dwindled to a mere 2 percentage points by 2010 (Central Bank 2013). Dissanayake (1995, p 126) has shown that female education has impacted not only on their personal development but also on the family and the society. Therefore, it is obvious that education has made a substantial impact in changing the role of the family and their relationships within the family.

#### **5.4.3 Diminishing Family Economies and Female Employment as Factor of Change**

Diminishing family economies and resultant increase in formal employment, especially the growth in female labour force participation are major factors influencing the role of family in Sri Lanka. In traditional societies, production tends to be family-based agriculture (Leach 1961). De Silva (2005, p.18) claims that in the traditional society,

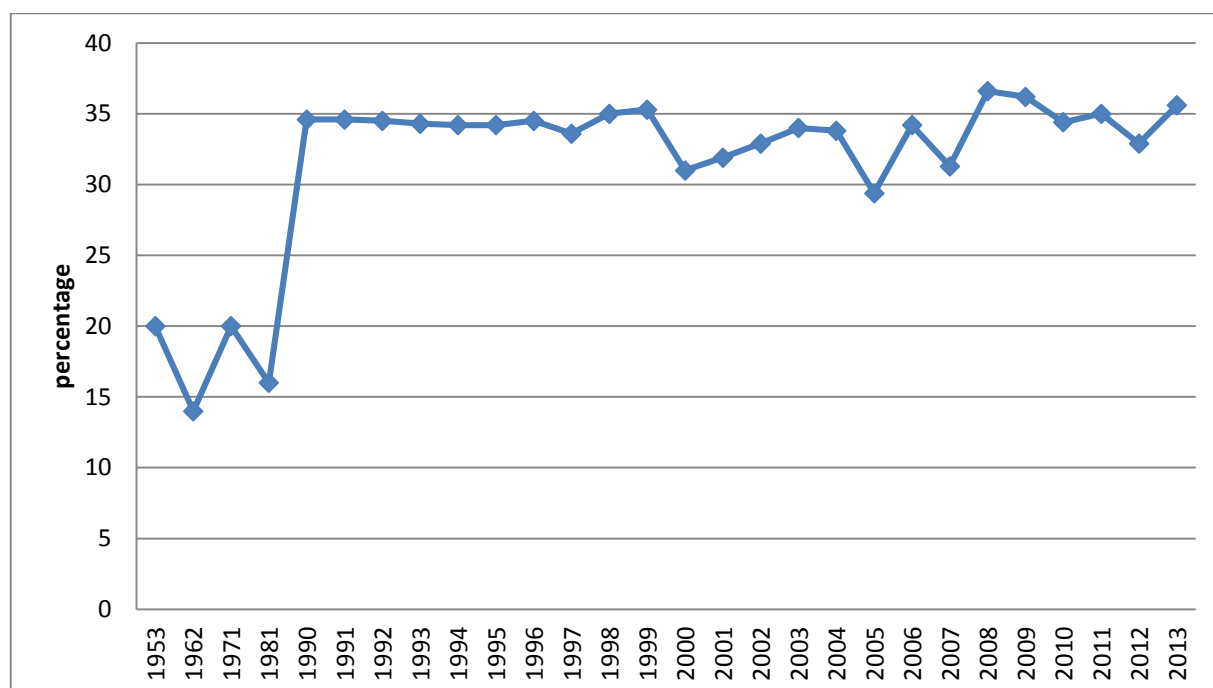
“Successive generations tend to have the same occupation, typically farming. Parental authority over children is reinforced by parent’s longer experiences and expertise, and co-residence of parents and adult children makes both economic and social sense. With modernisation production shifts to more specialised processes, modern market economies are dependent on an inherent division of labour”.

However, the family formation patterns are changing all over the world (United Nations 2013). Increasingly, both men and women want to first establish themselves in the labour market before having a family (De Silva 2005). Therefore, age at marriage together with increasing age of mothers at first childbirth have made it less likely to have a large number of children than previous generations (De Silva 2013), and many women remain childless (De Silva 2005). Presently, women have a better chance of fulfilling their labour market aspirations and they have become a much needed additional labour supply. While increased maternal employment has contributed to material wealth among families with children (OECD 2011, p. 18).

Perhaps one of the most dominant changes in family structure has been the steady flow of mothers stepping into the work force. The expansion of the job opportunities together

with increasing educational levels has resulted in an unprecedented increase in the female labour force participation (World Bank 2012; De Silva 2005). Figure 5.4 shows that female labour force participation took an upward trend during the 1980s and then somewhat stabilised around 30 percent.

**Figure 5.4: Sri Lanka: Female Labour Force Participation, 1953-2013**



Source: Department of Census and Statistics 1983, 2013a and 2013c

The labour force Survey data show that male labour force participation was 66.2 percent while it was 33.2 for females (Department of Census and Statistics 2013c). Although there is a gender gap in labour force participation between males and females, the upward trend of female labour force participation has enhanced the status of women in the family and society. The total number of employed persons were estimated to be 7.8 million in the first quarter of 2011, and among them, 42.7 percent were engaged in the services sector, 32.3 percent in the agricultural sector, and 25.1 percent in the industrial sector (Department of Census and Statistics 2013c). Although a higher percentage of employees were engaged in the non-agricultural sector, the majority of women were still employed in the agricultural sector which indicates that they may be contributing to the family economy. Although the unemployment rate has dropped to only 4.3 percent, female unemployment still remains high at 6.7 percent while it was only 3.0 percent for males. The highest female unemployment rates were reported for those 15 to 24 years of age, which suggests that women are expected to comply with

both roles as wives and mothers that deter them from either seeking regular wage employment, and/or discourage employers from enlisting women of childbearing age into the workforce.

At the international level, unskilled and semi-skilled labour migration began after 1977 due to the opening up of opportunities in the gulf regions (World Bank 2012). It is estimated that there are about 1.7 million Sri Lankans currently employed abroad. These employees brought foreign exchange earnings in 2009 which represent 47 percent of total foreign exchange earnings of the country (SBFE 2010). This suggests that engagement in foreign employment through international migratory flows from the 1980s has become the highest net earner of foreign exchange in Sri Lanka (SBFE 2010). The share of females in foreign employment was only 24 percent during 1986-1987 period but increased to 51.7 percent by 2009, while the share for males was 48.3 percent in 2009. As Hugo (1987) suggested, one can reasonably hypothesise that the absence of a considerable number of women due to employment abroad and their contribution to their families make a significant impact on the changing role of the family in Sri Lanka.

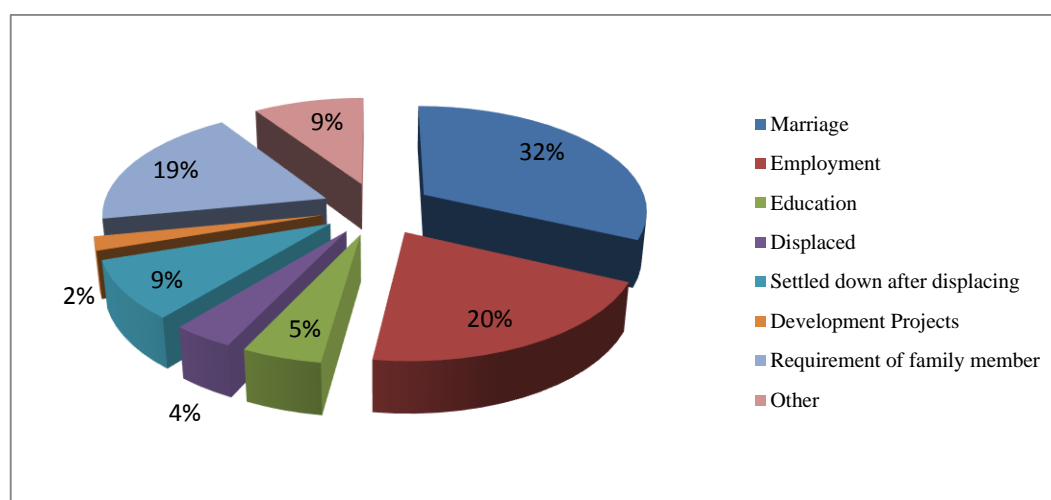
#### **5.4.4 Growth of Internal Migration and International Labour Migration as Factor of Change**

Both internal and international labour migration in Sri Lanka has shown an upward trend with the expanding global economy, economic liberalisation policies which were followed by larger flows of employment abroad since the late 1970's (IPS 2013). The significant feature of migration in Sri Lanka is the increasing demand for female labour in the free trade zones and overseas. Migration of one or more members of the family can influence the way in which the family functions and the way roles are distributed within the family. The absence of particular family members, on either a permanent or temporary basis, will shape family structure, both in the destination and origin areas (Hugo 1987). According to 2012 census data, about 18 percent of the Sri Lankan population is internally mobile. The main reasons for internal migration, was that the majority migrated for marriage, employment and education. However, the 30-year long war has also made a substantial proportion of people to be displaced. Figure 5.5 shows that one third had migrated for marriage while one fourth migrated for employment.



Therefore such mobility can also have a significant impact on the structure of the family, as well as on the role of the family.

**Figure 5.5: Sri Lanka: Migrant Population by Main Reasons for Migration, 2012**



Source: Department of Census and Statistics 2013a

The growth of international labour migration has produced a significant number of transnational families as a result of the dispersion of family members in different countries. Transnational families consist of core members residing in two or more countries but continue to share strong bonds of collective welfare and unity (Basch *et al.* 2005). Sri Lanka has experienced an increase transnational families as a consequence of the increasing rate of international labour migration (Ukwatta 2010). Hugo (2002) argues that a most important aspect of the labour migration is its influence on structural changes in the family. Although the international labour migration is temporary, it has had a significant effect on family structure. The majority of international labour migrants are females in the reproductive age groups, especially the peak age of child bearing. Undoubtedly international labour migration has reduced the time exposed to the risk of becoming pregnant which in turn has reduced family size. Table 5.6 shows that departures for foreign employment have accelerated since the 1980s. It can reasonably be assumed that this has had a substantial impact on family structure. At present, over 271,000 persons leave Sri Lanka annually for foreign employment mainly as contract employees in the Middle Eastern countries (IPS 2013). In recent years, the out-migration has also been more heavily focused on females, leading to a slight shift in the sex ratio of the working age population (IPS 2013). Table 5.6 shows that 39.9 percent of the migrants were in the prime reproductive ages of 25-

34 years of age. Hence, this can significantly influence the decline of fertility and in turn change the family structure.

**Table 5.6: Sri Lanka: Departure for Foreign Employment by Age and Sex, 2005-2012**

Age group	Average (2005-2009)			Average (2010-2012)		
	Male (percent)	Female (percent)	Total (percent)	Male (percent)	Female (percent)	Total (percent)
19 and below	1.5	1.6	1.5	2.2	1.1	1.7
20-24	17.3	13.2	15.1	17.2	11.1	14.3
25-29	25.3	19.5	22.2	18.4	15.0	16.7
30-34	16.9	18.2	17.7	24.8	19.4	22.2
35-39	13.5	16.9	15.3	13.9	16.1	15.0
40-44	9.6	15.3	12.7	10.3	17.0	13.6
45-49	6.7	9.3	8.1	7.1	13.2	10.1
50 and above	6.1	5.0	5.5	6.0	7.1	6.4
Not identical	3.1	1.0	1.9	0.1	0.0	0.0
Total	100	100	100	100	100	100

Source: SLBFE 2010, 2013, World Bank 2012

It has been mentioned that gender and the marital status of migrants can have a considerable impact on the family (Devasahayam n.d). For married women migrants, whether they are professional or low-skilled, mobility in search of employment can impact on family structure because mothers tend to be the central point of social relationships in the family (Devasahayam n.d; Devasahayam *et al.* 2007; Devasahayam *et al.* 2004;). Hence, if they are separated from the family for extended periods, the family has to acclimatise (Asis *et al.* 2004).

The expansion of the job opportunities available for females in the Middle Eastern countries has encouraged Sri Lankan women to look for employment opportunities abroad for higher wages. This factor has heavily influenced the labour force participation rate for females during the past few decades. Table 5.7 shows that by 2012 there is little difference between female and male workers engaged in foreign employment. It has been shown that the improved female labour force participation and their financial contribution to the family has improved their status within the family in Sri Lanka (Ukwatta 2010). This has been already perceived by both the elderly and their adult children in this study as a major factor in the changing role of the family in Sri Lanka.

**Table 5.7: Sri Lanka: International Labour Migration, Departures for Foreign Employment, 1986-2012**

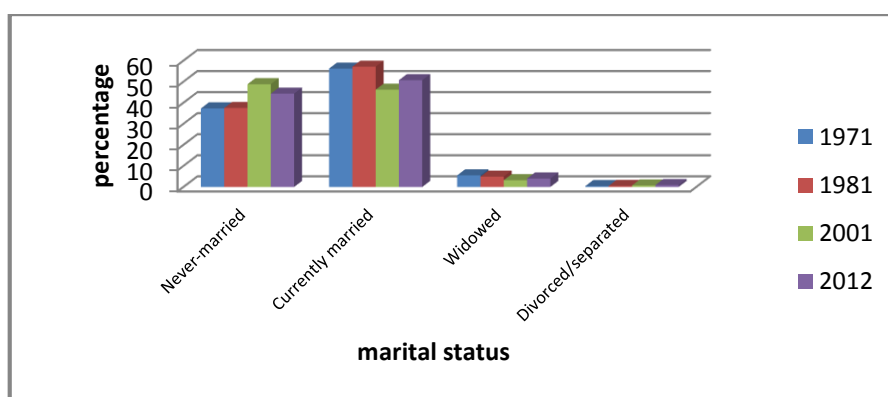
Year	Male		Female		Total
	No.	Percent	No.	Percent	
1986	11,023	76.3	3,433	23.8	14,456
1990	15,377	36.1	27,248	63.9	42,625
1996	43,112	26.5	119,464	73.5	162,576
2000	59,793	32.8	122,395	67.2	182,188
2006	90,170	44.7	111,778	55.4	201,948
2009	119,276	48.3	127,843	51.7	247,119
2012	143,784	50.9	138,547	49.1	282,331

Source: SLBFE 2010, 2013, Airport Survey 1992-1993, SLBFE

#### 5.4.5 Changing Marital Status as Factor of Change

The Changing status of marriage is an important factor influencing the changing role of the family because it can lead to an increasing number of young adults choosing to live with their parents for a longer period of time (De Silva 2005). This can either support the family, if these young adults are employed, and if not they will place a greater burden on the family resources and thus increase the two way dependencies. Figure 5.6 shows that an increase of never married population since 1981 in Sri Lanka.

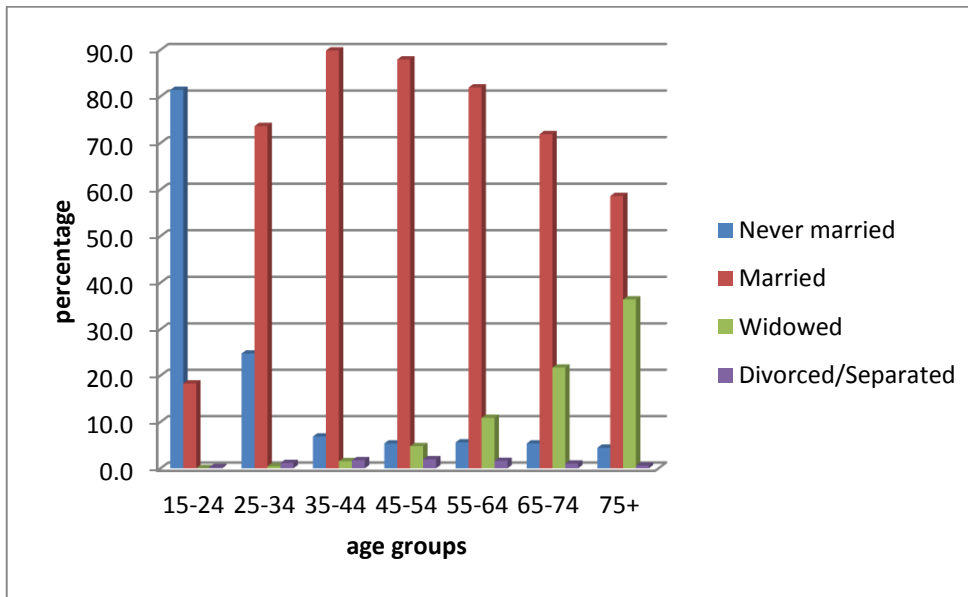
**Figure 5.6: Sri Lanka: Population by Marital Status, 1971-2012**



Source: Department of Census and Statistics 1983, 2002 and 2013a

Figure 5.7 shows that more young adults in manageable ages tend to be single in the census in 2012. This suggests that more young adults at marriageable ages, especially young men still live with parents which increase pressure on family resources.

**Figure 5.7: Sri Lanka: Population (15 years and over) Marital Status and Age (Both sexes), 2012**



Source: Department of Census and Statistics 2013a

Education, labour force participation and the increasing status of females in the family have influenced patterns of marriage in Sri Lanka (Dissanayake 1995). This is also reflected in the nature of marriage as well. It has been shown that girls have more opportunities to start love affairs since they have more freedom due to their increased enrolment in higher education institutions (Dissanayake 2000b). This shows that women tend to acquire more freedom within the family and within the society because of their increasing participation in educational activities and subsequent employment.

Women often delay marriage when other more attractive alternatives are present (Amin and Al-Bassusi 2004). This is relevant to Sri Lanka, especially with increasing female labour force participation rates observed during the 1980s. In the light of ever lengthening life spans, it is apparent that individuals have been given the time and the liberty to make certain decisions concerning their progression through adulthood (Uhlendorff *et al.* 2011). There are indications that this is leading to a delayed commitment to long-term adult partnerships and childbearing (World Bank 2012). Women in particular, are now able to psychologically justify delaying marriage and child bearing as rates of both infant and maternal mortality have declined so rapidly over the past years. However, both men and women are undertaking life transitions at

older ages. Thus, Sri Lanka is experiencing young people leaving home at a later age (De Silva 2005).

Marriage patterns are important determinants of fertility levels (De Silva 2010a). The postponement of marriage contributes substantially towards a reduction in fertility by limiting the total reproduction lifespan of the female, the cumulative effect of which influences the size of the individual families, and the population growth rate of the country (De Silva 2012, p. 9). Sri Lankan marriage trends show that female age at first marriage has increased by almost seven years during the past decade. Table 5.8 shows the trends in singulate mean age at marriage (SMAM) from 1901-2006/2007. The increase of SMAM in Sri Lanka is dramatic, increasing by almost five years from 18.3 in 1901 to 23.5 in 1971 for females and males.

**Table 5.8: Sri Lanka: Trends in Singulate Mean Age at Marriage, 1901-2006/2007**

<b>Year</b>	<b>Male(years)</b>	<b>Female(years)</b>
1901	24.6	18.3
1911	26.5	20.8
1921	27.0	21.4
1946	27.0	20.7
1953	27.2	20.9
1963	27.9	22.1
1971	28.0	23.5
1981	27.9	24.4
2000	-	24.6
2006/2007	-	23.6

Source: Department of Census and Statistics from 1901-1981, DHS 2000and2006/7

## **5.5 Emerging Intergenerational Inequalities**

Intergenerational inequalities in the present family have emerged as a result of changes from traditional to a modern family system. Brannen (2006) argues that major economic, social, cultural, political and demographic changes have disrupted and redefined traditional family and social structures and intergenerational relationships. In Sri Lanka, it is clear that the family form has been changing since the 1960s. From this analysis it is clear that the changing role of the family appears to be the major reason for emerging intergenerational inequalities between different generations in Sri Lanka. When the longevity of the elderly is increased and the proportion of the youth population is becoming smaller, the family structure has tended to change from the

shape of a pyramid to that of the beanpole (NIA 2011; Bengtson 2001; Bengtson and Allen 1993). This enhances the status of co-survivorship between generations (Bengtson 2001) which in turn influences the relationships, roles and functions of the family members. Therefore, it has been claimed that the increasing survival of people in Sri Lanka will enhance the duration of living with children and then obtaining their old age support only after marriage of the children (De Silva 1994). The time period which the elderly could live (or prospective ageing) can make a considerable impact on both the elderly generation and adult children generation.

The ongoing socialisation experiences of different cohorts emerging from social, economic and cultural changes associated with globalisation and technological change, will potentially increase the differences further in terms of the characteristics and experiences (Brannen 2006; Roopnarine and Gielen 2005). Such changes create intergenerational inequities between generations. Although multi-generational family structure is the norm in the society (Amarabandu 2004), the process of the changing role of the family in Sri Lanka during the last five decades arose due to different changes occurring in the family system and relationships. This is clearly reflected in the growth of the number of the elderly living alone and a long waiting list to enrol at elderly homes (NSE 2004; Silva 2004). The focus group discussions carried out at Elderly Homes in both urban and rural settings, revealed that the main reason for living in an elderly home is the widening gap between elderly parents and their adult children. The gap exists because of the differences in ideas, attitudes, and expectations. The survey undertaken here further reveals that adult children are living a busy life, with stress, and often with financial difficulties.

When expectations are high and busy with their work, adult children appear to ignore or do not have sufficient time to take care of their elderly parents. Although some children are financially strong, their modern attitudes and different lifestyles prevent them from living with their parents. Although some children are living with their parents, the generational gap between the elderly parent generation and their adult children have created many issues that can affect the well-being of the elderly population. Table 5.9 shows the reasons for the wider gap between elderly parents and adult children which can lead to a widening of the intergenerational inequalities between generations. It further shows that a quarter expressed concerns about their busy life and about another quarter stating their changing attitudes and ideas have

significantly influenced the widening gap between elderly parents and adult children. However, less than 5 percent of the elderly think that adult children do not have the habit of respecting elders.

**Table 5.9: Reasons for Wider Gap between Generations according to Elderly People**

<b>Reason</b>	<b>Percentage</b>
Busy life	25.4
Changes of attitudes and ideas	22.5
Maintaining higher social class	18.9
Younger generation living with stress	14.2
Selfishness	14.2
No good habits and respect for elders	4.7

Source: Elderly Survey 2012, multiple responses

Intergenerational inequalities can be explored further from the survey data by analysing the adult childrens responses to why they are living separately after marriage. Table 5.10 shows that almost two-thirds have done so because they needed to be independent and to have privacy in their lives. This suggests that many elderly parents will be left alone with the increase in nuclear families. Furthermore, such behavioural changes call for necessary support for the elderly from the government or non-governmental organisations in order to improve the well-being of the elderly.

**Table 5.10: Reasons for Adult Children Not Living with Elderly Parents**

<b>Reason</b>	<b>Number</b>	<b>Percentage</b>
Need to have a free life after marriage	57	46.0
Need to maintain privacy	24	19.4
Parents like to live with siblings	12	9.7
Parents wish to live in separate house for freedom	11	8.9
Not enough space at our home	5	4.0
Because of the conflict	5	4.0
Cannot look after them because of busy life	4	3.2
Parents land own by siblings	3	2.4
Have a separate own house in the same land	2	1.6
Suffering from a sickness	1	.8
Total	124	100.0

Source: Adult Children Survey 2012

Although traditionally the cultural norm in Sri Lanka has been for the elderly parents to be looked after by their adult children, the busier life of the children including formal

employment outside home and increasing costs of living, have made the adult children move away from such a norm as shown in Table 5.11. This further shows that half of them are of the opinion that the reason for not living with elderly parents is to have a free life after marriage without kin influence, whilst one fifth of them want to maintain privacy with their immediate family. This suggests that the above mentioned cultural norm has been fading away in Sri Lankan society and a new norm is emerging over recent decades. Therefore, elderly parent and adult children family relations have become much more vulnerable and less stable.

**Table 5.11: Factors Affecting Declining the Relationship between Elderly Parents and Adult Children**

<b>Reason</b>	<b>Number</b>	<b>Percentage</b>
Busy life and no time to look after them	63	56.7
Cost of living higher	19	17.0
Trends for living in nuclear	9	8.1
Increasing working women	6	5.4
Parents living with loneliness	5	4.6
Conflict among siblings because of competition	5	4.6
Decreasing the care and love for their parents	4	3.6
Total	111	100

Source: Adult Children Survey 2012

## **5.6 Status of the Elderly in Traditional and Modern Family**

Increased schooling may break down traditional values and norms, including family values, which entails a specific obligation for the children to support and care for their elderly parents (De Silva 2005; Alam and Mukherjee 2005). Although the evidence for such effects remains incomplete, such situations may occur for two reasons: increased schooling results in children spending less time receiving care and guidance from their parents, and hence the feeling of debt towards the parents is reduced, and secondly because of the content in formal schooling which in some developing countries is heavily westernised and the system tends to inculcate western values of individualism and self-realisation (Caldwell 1980). Both processes make the younger generation less willing to sacrifice time to provide physical care for elderly parents (Mason 1992). This may be a major problem in the family in relation to care-giving aspects of support for older persons. The elderly population are highly respected by the traditional family system due to their age, experience and wisdom; however, researchers argued that the



changes in the socio-economic and demographic dimensions, modernisation and urbanisation have gradually made considerable impact on the traditional family system and cultural values (Singh *et al.* 2014). Elderly in the traditional society were respected by the family and the society (Hugo 1997). The Sri Lankan elderly traditionally were dependent on the family to be the main care-giver and most importantly as their support base (Siddhisena 2005). Amarabandu 2004, p. 83 states,

“Sri Lanka for centuries has had a social hierarchy, which consisted of the nuclear family, the extended family and the village. Within this social system, the responsibility of looking after the elderly was vested with the family, as a moral obligation of the children to look after parents in their old age. Traditionally, the youngest male who inherits the ancestral house is expected to look after the parents. Other children in the family assist in cash and in kind to maintain the parents. In a rural agricultural society the youngest male who inherits family house often continues to operate the income-generating activities of the father. This setup added ethical values concerning geriatric care to the rural family and society. The elders who were childless were looked after by a close relative or by persons outside the family. All these arrangements of elderly care were possible within a traditional family system, and a simple lifestyle was interwoven by villagers’ cooperation and goodwill”.

Family support has been an accepted norm and over thousands of years in Sri Lanka. Traditionally Sri Lankan society consisted of a multi-generational, extended family living together and descending through the male line. In this family system, children were supposed to take responsibility for providing financial security to their parents during old age. As advocated by Sri Lankan culture, adult children, especially sons, were raised to respect and care for their elderly parents (Amarabandu 2004). Some argue that the process of economic development and modernisation may be altering traditional norms and values, and changing family structure from extended families to nuclear families in many societies in Asia, including Sri Lanka (Singh *et al.* 2014 Lin and Yi 2011). Continued low fertility and internal migration appear to reduce both the willingness and the capacity of adults to care for their elderly parents. Moreover, women, who have been the primary care-givers, now actively participate in formal employment activities (World Bank 2008). These changes have been affecting the role of family in traditional intergenerational support. However, some still argue that despite these social changes, the practice of family support to elderly parents by adult children still prevails (Sun 2004). This suggests that even though social and economic transformations have weakened the role of family support and the influence of traditional values are still prevalent. However, this feature cannot be predicted in the future since the family unit has undergone significant changes during recent decades in

modern Sri Lanka. Moreover, when the elderly are living longer than in the past, they tend to face greater burden at present.

## **5.7 Conclusion**

The analysis discussed in this chapter shows that major changes in the family in Sri Lanka are clearly visible since the 1980s. This coincides with the onset of population ageing as envisaged by the previous chapter. The Sri Lankan family has been transformed from its traditional to modern status. This was examined with the use of family composition, structure and household size, an increasing trend in female headed households and changes in age composition. Major factors responsible for the changing role of the family on the basis of the elderly parents and their adult children, found that education, especially female education, a rise in female labour force participation, growth of internal and international migration were all key factors of the change. In addition, the existence of multi-generational families as well as emerging intergenerational inequalities have created a wider gap between generations. In this context, the change in the status of elderly when the family transformed from its earlier traditional status has played a major role. In particular, the next chapter is focused upon the living arrangements of the elderly in Sri Lanka.

## CHAPTER 6

### FACTORS INFLUENCING LIVING ARRANGEMENTS OF THE ELDERLY

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#### 6.1 Introduction

This chapter examines the living arrangements of the elderly because they are affected by the changing role of the family and in turn such arrangements can have an impact on the well-being of elderly. As the population in Sri Lanka ages, issues surrounding support and care of the elderly population need attention (World Bank 2008; Siddhisena 2005; NSE 2004). Different types of living arrangements can place pressure on demand for formal and informal support systems because of competing demands for scarce resources (Palloni 2001). Therefore, examination of the factors influencing the living arrangements and social support systems available to the adult population, will help policy makers address the emerging ageing issues.

Literature on living arrangements suggests that co-residency with adult children and other relatives is advantageous to both the elderly and society (Palloni and De Vos 2003; Andrade and De Vos 2002; Hoerger *et al.* 1996; Palloni 2001). Such studies claim that families provide emotional comfort and physical care (Ahmad and Das 2011). Besides, co-residence can reduce living costs as adult children may also financially supplement the elderly (Ulker 2008). However, recent studies have found that the proportion of elders living with adult children or other relatives, have been declining in developing societies (United Nations 2013; Panigrahi 2010; Palloni 2001). Such a decline is due to a variety of reasons such as an increase of the income of the elderly, a reduction in fertility, improvements in the health status of the elderly, the changing mode of production, and changing social values (Meng and Luo 2008, p. 1). It is also reasonable to hypothesise that the erosion of the traditional norm of the elderly co-residing with their family members can threaten their well-being where public transfers to the elderly are unlikely to increase. Some studies have found that elders living alone are poorer than those who co-reside with children (Saunders and Agree 1993; Smeeding 1988). However, some claim that income or pension can contribute positively to the tendency for the elderly to live alone (Kan *et al.* 2001; Chan and DaVanzo 1996).

Therefore, this chapter explores the changes in the living arrangements of the elderly and factors influencing such changes and their effects on the well-being of the elderly. The issues related to different living arrangements of the older people are also examined. Most importantly, the focus is upon the preferences of the elderly for living arrangements and care.

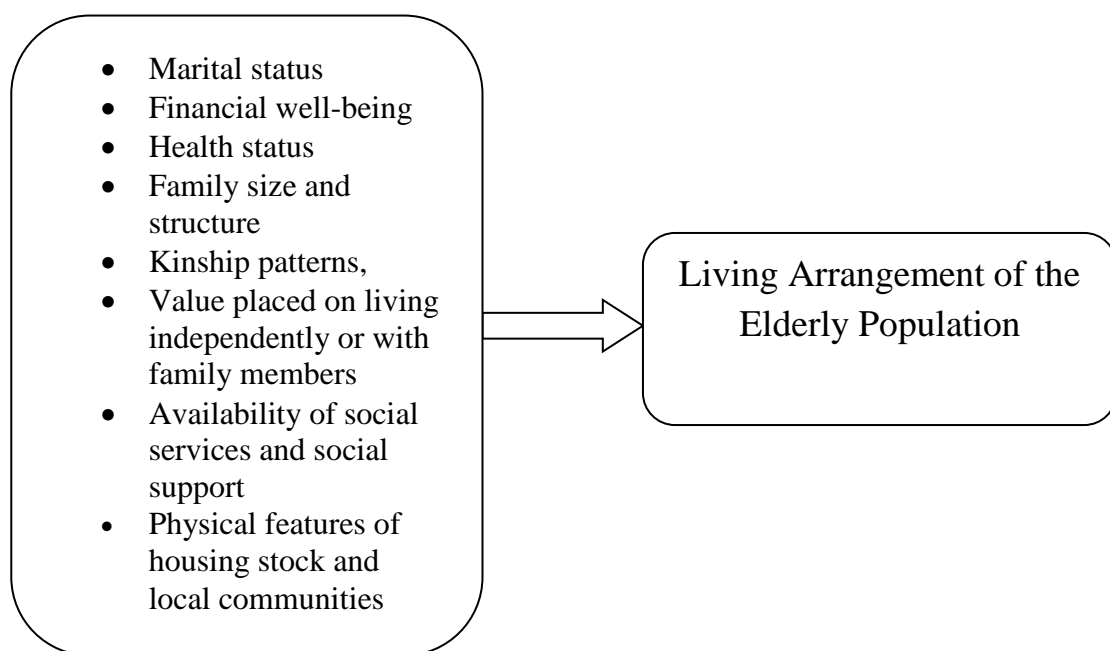
## **6.2 Patterns of Living Arrangements**

Households throughout the developing world represent the main institution responsible for the distribution of goods and services between generations, and they are the principal venue through which age and kinship roles are expressed (Becker *et al.* 2009; Thornton *et al.* 1984; Kuznets 1978). Khoo (2011) argues that elderly peoples' living arrangements can be regarded as an important aspect of their well-being. In this context, the characteristics of the household where an older person lives, is an important aspect of his/her well-being. Most cultures have their own norms about respect for older adults and the responsibility of the young to care for the old (Martin 1990; Nydegger 1983). However, the accepted cultural norm in Sri Lanka is for the elderly to be cared by their adult children (Siddhisena 2005; Amarabandu 2004).

The living arrangements of the elderly appeared not to be an issue a few decades ago in developing countries (Khoo 2011; Panigrahi 2010). However, the major transformation of demographic forces and the family structure have had a significant impact on their living arrangements (Panigrahi 2010; Velkoff 2002; Palloni 2001). This has become an emerging issue in most of the developing countries today as a consequence of the accelerated demographic transition in those countries. Living arrangements mirror both the nature of accommodation required, and the need for community or institution long-term care (Kinsella and Phillips 2005, p. 28). In addition, living arrangements frequently exhibit the socio-cultural preferences, desires and ability of the elderly to choose for certain types of living arrangements (Kinsella and Phillips 2005, p. 28). A large proportion of elderly people are living independently in industrial countries, whereas in Asian countries the elderly tend to live with their adult children (United Nations 2013; Panigrahi 2010). Living arrangements are influenced by a variety of factors, including marital status, financial well-being, health status, family size and structure, as well as cultural traditions, such as kinship patterns, the value placed on

living independently or with family members, the availability of social services and social support, and the physical features of the housing stock and local communities (Velkoff 2002, p. 1). This conceptualisation is shown in Figure 6.1. Although the most common living arrangement in Asian countries is elderly living with their adult children, significant changes have occurred over the years. Similarly, the living arrangements of the elderly in Sri Lanka have also undergone changes over the last few decades (World Bank 2008; Siddhisena 2005; Silva 2004).

**Figure 6.1: Conceptualisation of Potential Factors Influencing Living Arrangement of the Elderly Population**



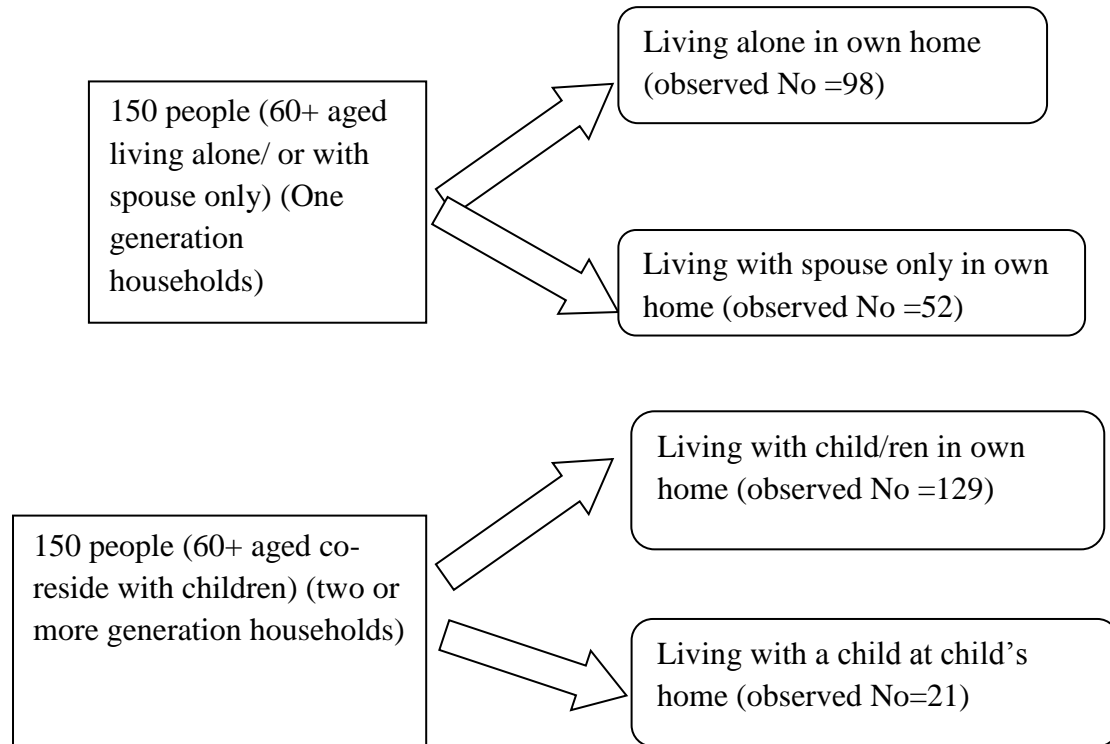
Source: Velkoff 2002, p. 1

The term ‘Living arrangement’ or ‘Co-residential arrangement’ is used interchangeably to refer to the household structure of the elderly (Palloni 2001, p. 1). In this study, elderly living arrangements are defined here as, (1) living alone in their own home (2) living with spouse only in their own home (3) living with an adult child in their own home (4) living with an adult child in their child’s home.

For the survey sample of 300 elderly was drawn from two categories. In which, 150 cases are from those who live alone or with spouse (one generation households) and another 150 from those who co-reside with their children (two or more generations households), irrespective of whether they live in their own home or at their children’s residence. This is a probabilistic sample and the sampling method is outlined in detail in

chapter 3 which shows the scientific nature of the sampling process. Accordingly, four main categories of living arrangements are depicted in Figure 6.2 with their relative numbers.

**Figure 6.2: Sampling and Observed Number of Cases for Each Category of Living Arrangement**



It is important to mention here that the main intention is not only to examine the type of living arrangement but also to explore reasons for such living arrangements. In examining those who are within the category of one generation households, it was found that 32.7 percent living alone while, 17.3 percent living with their spouse as a couple (Table 6.1). Some of those living alone without their spouse because 55.7 percent were widowed while 36.1 percent had never married and still remained single. However, the major living arrangement appears to be in 'their own home' rather than living in their childrens' home or elsewhere because 93 percent of the elderly in the sample lived in their own home and only 7 percent resided in their childrens' residence. A similar finding has been observed from the NES (2004), which showed that the majority of elders (71 percent) resided in houses either owned or rented by them. In addition, Siddhisena (2005, p. 10-11) also has shown that in Sri Lanka 69.7 percent of the elderly who co-resided or lived alone/ or with spouse only, resided in their own

home. It should be mentioned that Siddhisena's survey was conducted 7 years prior to this survey. In addition, the investigation suggests that a third of the elderly who live alone have never married. It is important to note that the elderly who live alone are identified as those living without a spouse/ and or children. This analysis also shows 4.7 percent of the elderly living alone/ or with spouse only are childless and hence they live in one generation families. Table 6.1 shows the percentage distribution of the elderly in the sample according to the type of living arrangements. It further shows a third live alone in their own home, 17.6 percent live with their spouse making up one generation families. However, it shows that higher proportion of elderly are living with their children in their own home, while only 7 percent live with an adult child in their child's home.

**Table 6.1: Elderly according to Types of Living Arrangements**

<b>Type of living arrangements</b>	<b>Number</b>	<b>Percentage</b>
Living alone in own home*	97	32.2
Living with spouse only in own home	53	17.6
Living with child/ren in own home	129	43.0
Living with a child at child's home	21	7.0
Total	300	100.0

\*Own home consists of property owned or rented by elderly person/s

Source: Elderly survey 2012

Property wealth of elderly people is really important when living arrangements are examined because it can affect their well-being as well as wealth transmission patterns. The study sample showed that the three fourth of elderly were living in their own home have property ownership while one fourth of elders living in a rented house.

It is also interesting to investigate whether the children of the elderly living in one generation families were living close to their parental home so they could look after them. This may be a major reason why a significant number of elderly live in one generation families. This is clearly reflected from the in-depth studies carried out during the field work, because the majority of the elderly, who live in one generation families and have children, had at least one child living in close proximity while those elderly whose children have migrated still had some relatives living in neighbouring areas.

Table 6.2 shows that the majority of the children whose elderly parents live alone or with spouse only in their own home live within the same Divisional Secretariat but in a separate household. On average, the proportion is higher for those elderly who live

alone compared to those living with their spouse only. This has also affected the decline of co-residency with children at childrens' home. Bian and others (1998) with the use of data from two Chinese cities (Shanghai and Tianjin) in 1993, claimed that although most elderly still live with children, many of them also had children living nearby, providing regular non-financial assistance and maintaining frequent contact. Similar findings have been observed in Thailand and Cambodia as well (Zimmer *et al.* 2008).

**Table 6.2: Elderly according to Their Living Arrangements, Birth Order of the Children and Their Current Place of Residence**

Living arrangements	Place of residence of the adult children		Total
	At least one child living in the same DS division where parents live (percent)	All children living outside the DS division where parents live (percent)	
	1 <sup>st</sup> child (N=101)		
Elderly living alone	67.2	32.8	100
Elderly living with spouse only	62.5	37.5	100
	2 <sup>nd</sup> child (N=83)		
Elderly living alone	72.2	27.8	100
Elderly living with spouse only	72.4	27.6	100
	3 <sup>rd</sup> child (N=65)		
Elderly living alone	76.7	23.3	100
Elderly living with spouse only	59.1	40.9	100
	4 <sup>th</sup> child (N=46)		
Elderly living alone	71.9	28.1	100
Elderly living with spouse only	57.1	42.9	100
	5th child and over (N=53)		
Elderly living alone	68.5	31.5	100
Elderly living with spouse only	72.2	27.8	100

Source: Elderly survey 2012

Table 6.2 shows that the increase in the proportion of elderly who live alone/ or with their spouse only in one generation families is due to the increasing share of proximate

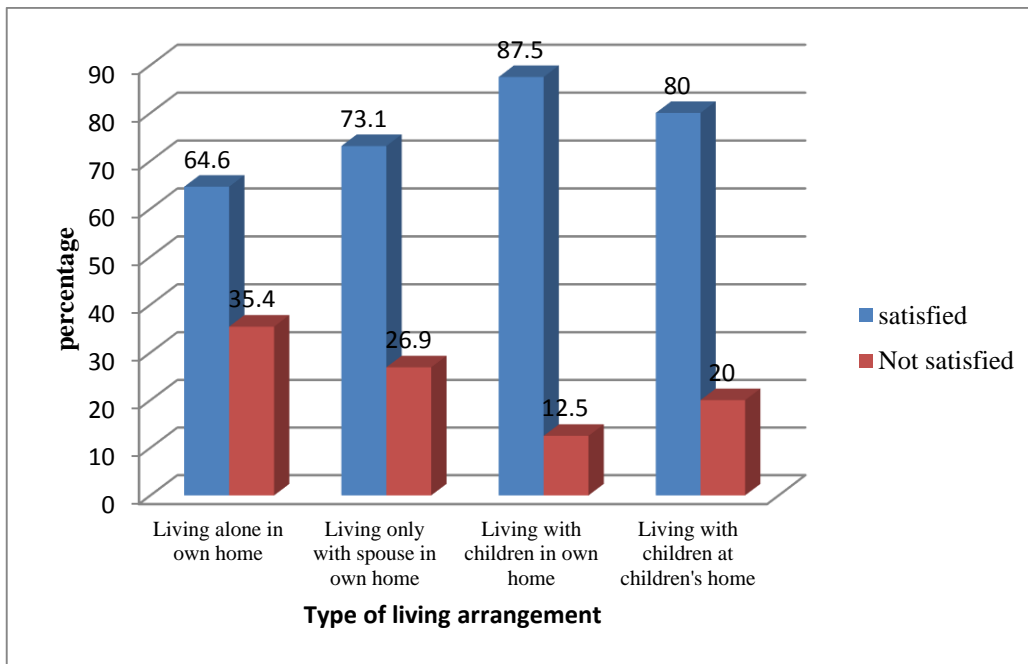


children. It is also important to note here that 63.2 percent of the elderly in the sample had children who had moved away and were living elsewhere in Sri Lanka and their impact is discussed in more detail later in this chapter and subsequent chapters.

Studies of elderly living arrangements in developing countries are limited. However, a comprehensive review of such studies can be seen in Palloni (2001), where some useful information on living arrangements in some Asian and Latin American countries is provided. This review suggests that in most non-western countries, the proportion of elderly living alone is lower than in Western society but the trend towards increased separate living seems to be similar. Some ageing studies have shown that the majority of elderly people maintain an independent residence and have at least one child in close proximity (Lei *et al*, 2013; Adams 1968; Shanas 1968). This aspect has not been investigated in any of the previous ageing studies in Sri Lanka. The likely outcome is that when children leave home after their marriage to live independently, they do not abandon their parents but choose to live in close proximity so they can take care of their elderly parents. This is mainly due to a number of reasons, such as obtaining the parents' properties; ability to take care of each other when needed; and for increased security etc. In most Asian and Latin American countries, public transfers are limited and hence the declining trend in co-residential status can have a substantial impact on the well-being of the elderly (Palloni 2001).

This study found that 22.7 percent of the elderly are not happy with their current living arrangements, which varied by the type of living arrangements as shown in Figure 6.3. It appears that most of those who live alone are not satisfied with their current living arrangements, whereas many of those living with their children in their own home appear to be happier. However, it further shows that those living with children or spouse rather than living alone are more satisfied, 87.5 percent of those living with children in their own home compared to almost two-thirds living alone in their own home.

**Figure 6.3: Elderly by Satisfaction with Their Living Arrangements**



Source: Elderly survey 2012

Financial difficulties can burden the elderly if they live alone or if they are childless (Knodel and Chayovan 2008, p. 43). It was found that the elderly encounter financial difficulties irrespective of the type of living arrangement and thus financial issues were the main reason for non-satisfaction with the current living arrangement. Table 6.3 shows that more than 90 percent of elderly living with their spouse only were facing financial difficulties and 50 percent of elderly living alone had a similar problem. However, the elderly living with a child in their home have more financial difficulties than those who co-reside with children in their own home. Table 6.3 is derived with the use of multiple answers obtained from the elderly about the reasons for their dissatisfaction with living arrangements as there can be more than one reason. Those who live alone or with spouse only in their own home mentioned that the lack of care was the second major reason for dissatisfaction with their current living arrangement while those who live with their children at their residence mentioned ill health as the second major reason. The latter implies that those elderly may be living in their childrens' residence because of ill-health. It further shows that more than half of the elders who live alone or with spouse mentioned the lack of care as the second main reason for their dissatisfaction.

**Table 6.3: Reasons for Dissatisfaction with Living Arrangements by the Elderly**

Reasons for non-satisfaction	Living Arrangements			
	Living alone in own home N=30 (percent)	Living with spouse only in own home N=13 (percent)	Living with child/ren in own home N=13 (percent)	Living with a child at child's home N=4 (percent)
Financial difficulties	51.6	91.7	61.5	75.0
No care is taken by anyone	48.4	50.0	23.1	25.0
No emotional support	38.7	33.3	46.2	25.0
ill health	35.5	33.3	46.2	75.0
Problem with children	16.1	0.0	23.1	25.0
Need to do too much house work	16.1	25.0	23.1	0.0
No social net work	9.7	8.3	0.0	25.0
No rest	9.7	41.7	15.4	0.0
No enough facilities	3.2	16.7	15.4	25.0

Source: Elderly survey 2012; multiple responses

## 6.3 Demographic Determinants of Living Arrangements

### 6.3.1 Age and Living Arrangements

The life span of people has increased in developed countries, including Sri Lanka as discussed in chapter four. Therefore, age can be regarded as one of the most important determinants of living arrangements of the elderly. The age of the elderly has been categorised as young-old, old-old and oldest-old for the age groups of 60-69, 70-79 and 80 and above and respective percentages were 48.7, 33.0 and 18.3 percent (Table 6.4).

Table 6.4 shows the proportion of elderly living alone decreases as age advances. The oldest elderly who live with spouse only is the lowest percentage observed among all the categories of living arrangements. However, when it is controlled for the oldest age group, it is observed that a relatively high proportion of elderly live alone compared to other categories of living arrangements. In addition, there is a relatively low proportion of younger elderly who co-reside with children at their residence.

**Table 6.4: Living Arrangements of Elderly by Age**

<b>Age Group</b>	<b>Living Arrangements</b>			
	<b>Living alone in own home N=97 (percent)</b>	<b>Living with spouse only in own home N=53 (percent)</b>	<b>Living with child/ren in own home N= 129 (percent)</b>	<b>Living with a child at child's home N= 21 (percent)</b>
60-69	46.4	45.3	53.5	38.1
70-79	27.8	45.3	30.2	42.9
80 and over	25.8	9.4	16.3	19.0
Total	100	100	100	100

Source: Elderly survey 2012

Table 6.5 illustrates that the majority of those aged 80 years and above live in close proximity to children that can take care of them. Although one could expect that this generation has more children, Table 6.5 does not show any significant difference in respect to children living in close proximity to their parental home. However, some children irrespective of their birth order live in close proximity to their parental home.

**Table 6.5: Elderly Who are Aged 80 Years and Over and Live Alone in Their Own Home by Their Childrens' Residential Status**

<b>Child's order</b>	<b>Living within the DS division where parents live alone (percent)</b>	<b>Living outside the DS division of the parents' residence who live alone (percent)</b>	<b>Total</b>
1 <sup>st</sup> child (N=13)	61.5	38.5	100
2 <sup>nd</sup> child (N=12)	83.3	16.7	100
3 <sup>rd</sup> child (N=10)	90.0	10.0	100
4 <sup>th</sup> child (N=8)	62.5	37.5	100
5 <sup>th</sup> child and over (N=8)	72.7	27.3	100

Source: Elderly survey 2012

The in-depth interviews also showed that most of the elderly manage their needs and obtain support from those children who live in close proximity, as well as from neighbours, friends and relatives. Most of the elderly, who lived in their own home with undivided property among children, tend to get support from those children who live in close proximity. This is mainly because the childrens' level of care for the elderly parents can determine the chance of getting their share of the property. It was also found that elderly who at the oldest ages were living alone because of their childrens'

migration. However, some studies conducted on the relationship between age and living arrangements of the elderly found that the proportion of elderly living alone decreases as they become older (Liang *et al.* 1992; Mansy *et al.* 2002; Zimmer and Kim 2001). Similarly there is a shift towards co-residence with children as age advances. This happens because the elderly themselves are unable to take care of themselves without any outside help. It is apparent from this study that property ownership gives them a capacity to obtain support from children and others (United Nations 2011). This is reflected in the following case study:

Ranmali is an 85 years old widow who is living in her own home. She has two children; her daughter lives in Kalutara with her husband, but her son lives nearby. After her husband's death she has been living alone. She is now dependent on her husband's pension for survival. Although she has property and income she is suffering from loneliness. Her son has built a separate house close to her house. Although she expected that her son would continue to live with her, but he decided to live separately because of his wife. She further said that she gets support from her son and daughter-in-law because she still has not divided the property among the children; invariably her son and daughter were trying to gain her favour to be entitled to inherited land. Her daughter also frequently visits her and takes care of her needs. She has been suffering from arthritis for a long period of time. Although she is not happy with the current living arrangement, she says that her children attempt to give their support. But she gets more support from neighbours than her own children (Case 1, Respondent 291).

### **6.3.2 Gender, Marital Status and Living Arrangements**

The relationship between gender and living arrangements becomes stronger when marital status is considered (Singh *et al.* 2014; Panigrahi 2010). Therefore, the analysis in this section focuses upon the impact of both gender and marital status on living arrangements. Table 6.6 shows that more elderly women live alone than elderly men because the majority of them are widowed due to higher life expectancy for females and the fact that they usually marry men older than themselves. Table 6.7 shows that more women are widowed at older ages than their male counterparts. A higher percentage of never-married women are also observed compared to men at the same age. Therefore, it is evident that more women tend to live alone in their own home because of their widowhood and single status at older ages. Women are somewhat more likely to live alone and less likely to live only with a spouse than men, reflecting the higher levels of widowhood among women (Knodel and Chayovan 2008, p. 43). In addition, it is a

custom for Sri Lankan women to marry older men and thus there is a significant age gap between husband and wife (Dissanayake 2000).

**Table 6.6: Elderly by Their Living Arrangements and Gender**

Living arrangement type	Gender	
	Male N=116 (percent)	Female N=184 (percent)
Living alone in own home	17.2	41.8
Living alone with spouse only in own home	29.3	10.3
Living with child/ren in your own home	50.0	38.6
Living with children at child's home	3.4	9.2
Total	100.0	100.0

Source: Elderly survey 2012

**Table 6.7: Marital Status of the Elderly by Age and Gender**

Age and Marital Status	Gender		Number
	Male (percent)	Female (percent)	
60-69			
Married	84.3	34.2	85
Divorced/separated	0.0	3.9	3
Widowed	11.4	39.5	38
Never Married	4.3	22.4	20
70-79			
Married	85.7	29.7	49
Divorced/separated	0.0	0.0	0
Widowed	11.4	54.7	39
Never Married	2.9	15.6	11
80 and over			
Married	45.5	6.8	8
Divorced/separated	0.0	0.0	0.0
Widowed	54.5	86.4	44
Never Married	0.0	6.8	3
Total	100.0	100.0	300

Source: Elderly survey 2012

Table 6.7 further shows that a higher proportion of women aged 60-69 years remained single and hence more women tend to live alone in their own home. Knodel and Chayavon (2008, p.43) showed that there is a greater chance for those at oldest ages

being widowed compared to the younger elderly. This was evident among those in the survey where widowhood increased as age increased.

Co-resident status of the elderly can be due to factors such as those who are in poor health or those who do not have their own home, and have to move into their childrens' house. This was clearly investigated through the in-depth survey carried out during the field work which showed that co-residence with children in their house and ill health tended to indicate serious difficulties at old age.

Sumanalatha is a widow who is 75 years old. She has four children and was married to a carpenter. She is living in her younger daughter's house. Their house has been already given as a dowry to her younger daughter because of the delay in her marriage. However, Sumanalatha was ill-treated by her daughter and son-in-law after the death of her husband. Although she has three more children, they live in faraway places and most importantly, she is reluctant to go and live with them since the house was given only to their younger daughter. This younger daughter has one son who is always troubling her. Sumanalatha is suffering from diabetes and needs regular medical treatment but she is unable to attend to her health needs since she faces many issues in her living environment. Moreover, she cannot help her children and grandchild's work according to their expectations because of her ill health. She has financial difficulties since she doesn't have a proper income. Although she gets 'pin-padi' (government's charity allowance), it is not sufficient to fulfil her daily needs. Therefore, she is undergoing many hardships in her current living arrangement for three main reasons; she doesn't have her own house, her health situation has deteriorated and she has financial difficulties (Case 6, Respondent 20).

The following case study shows that some give away their property to sons by expecting old age care but this does not happen as expected.

Kusumawathi is an 88 years old widow who lives in her daughter's house. Their house was given to her son and she started living with him and his family. However, when she became sick her daughter-in-law sent her to the daughter's house. She had to undergo a by-pass surgery and thereafter she has lived with her daughter's family as she felt that it was more comfortable. The daughter's husband, as well as grandchildren, treat Kusumawathi very well but their busy lifestyles do not allow them sufficient time to attend to Kusumawathi's essential needs. This has made her feel very lonely. Therefore she said that she has all the facilities, but she is suffering from loneliness and bad health (Case 7, Respondent 21).

### **6.3.3 Number of Children and Living Arrangements**

It is generally believed that, in traditional societies children are considered as security for old age (Knodel and Chayovan 2008). Therefore, one of the major demographic

factors that determine the living arrangements of the elderly is the number of children. It has been a cultural norm in Sri Lanka for the parents to consider children as old age security (World Bank 2008;Siddhisena 2005; Amarabandu 2004; Silva 2004). Table 6.8 shows the distribution of the elderly by age and number of children still alive and shows young elderly has less number of children compared to elderly in advanced ages.

**Table 6.8: Elderly by Age and Number of Children Still Alive**

Number of children still alive	Age group			Total (percent)	Number
	60-69 (percent)	70-79 (percent)	80 and over (percent)		
0	18.5	16.2	10.9	16.3	48
1-2	32.2	23.2	23.6	27.7	75
3-4	34.2	31.3	21.8	31.0	87
5 and over	15.1	29.3	43.6	25.0	90
Total	100.0	100.0	100.0	100	300

Source: Elderly survey 2012

It has been mentioned that co-residence with children and the likelihood of getting support from children depend on the number of children available to provide such support (Knodel and Chayovan 2008; Knodel *et al.* 1995; Knodel *et al.* 1992). It is striking to note from Table 6.8 that 16.3 percent of the elderly do not have children, which suggests that a significant proportion of elderly do not have such support in old age. When this aspect is examined by the type of living arrangement, the study shows that 62.5 percent of the elderly living alone and 37.5 percent of the elderly living with spouse encounter some difficulties by not having children to take care of them. It seems this category has serious policy relevance since this group needs special assistance from the government. Those elderly who are in the age group 80 and above have more children than the other age groups, due to fewer children because of the fertility decline over the years. Therefore, the younger elderly have more difficulties because of less children than their older counterparts.

When living arrangements by the number of children ever born are further examined Table 6.9 shows that 80 percent of the elderly living alone have no children. Those who have more children such as 5 and more, tend to live with children in their own home or in childrens' homes. This suggests that the presence of a larger number of children provides the elderly with a higher chance to co-reside with children.



**Table 6.9: Living Arrangements of the Elderly by Number of Children Ever Born**

Living Arrangements	Number of children still alive(percent)			
	0	1-2	3-4	5 and over
Living alone in own home	83.3	21.3	18.4	28.9
Living alone with spouse only in own home	16.7	26.7	16.1	11.1
Living with child/ren in own home	0.0	46.7	59.8	46.7
Living with a child in child's home	0.0	5.3	5.7	13.3
Total	100	100	100.0	100.0

Source: Elderly survey 2012

This analysis suggests that the number of children alive is inversely related to elderly living alone. Literature on living arrangements of elderly supports the finding of this study because they show that the number of children are positively related to the probability of living with them (Zimmer and Kwong 2003; Rajan and Kumar 2003; Martin 1989; Bian *et al.* 1998). In other words, it suggests that more children increases the chances of the elderly co-residing with them. This analysis further suggests that the elderly who do co-reside with children tend to do so within their own home.

## 6.4 Socio-economic Determinants of Living Arrangements

The above discussion was confined to the demographic factors but that alone do not explain the differences observed between different types of living arrangements. Researchers who have worked on developing countries data have shown that socio-economic and cultural factors have the strongest influence on the living arrangements of the elderly (Verma and Satayanarayana 2012; Lei *et al.* 2011; Lin and Yi 2011). Socio-economic factors also can determine why the elderly tend to live in different living arrangements. Developing countries are currently experiencing socio-economic changes, modernisation and urbanisation which are gradually eliminating the traditional parent-off-spring co-residence and family bond. This can cause the reduction in the interaction between family members which in turn reduces the expected financial, social and physical support for elderly. In the traditional family context, Sri Lankans are bound by cultural values, which stresses that the elderly should be taken care of by children. The elderly are greatly respected by the traditional family system because of their age, experience and wisdom. However, as discussed in chapter 5, in modern Sri

Lankan society the values and perception regarding the role of the elderly is changing speedily.

#### 6.4.1 Place of Residence and Living Arrangements

Place of residence can be regarded as one of the important determinants of living arrangements of the elderly as urbanisation is strongly associated with the influence of Western culture and lifestyle and growing individualism, which can breakdown the traditional family system in which the elderly were cared for by their off-spring (Singh *et al.* 2014). Although the sample is equally divided for one generation families and two/or more generation families by place of residence (urban and rural), Table 6.10 shows that most urban higher proportion of the elderly live alone in their own home compared to their rural counterparts. However, living alone with spouse in own home is greater for the rural counterparts co-residing living arrangement does not show any significant differences by place of residence categories. The study further found that only 11.3 percent of the urban elderly who live alone in one generation families are unhappy about their living arrangement compared to 34 percent of the rural elderly living alone in one generation families.

**Table 6.10: Living Arrangements of the Elderly by Urban and Rural Residence**

Type of living arrangement	Rural		Urban	
	Number	Percent	Number	Percent
Living alone in own home	45	30.0	53	35.3
Living alone with spouse only in own home	30	20.0	22	14.7
Living with an child/ren in own home	63	42.0	66	44.0
Living with a child at child's home	12	8.0	9	6.0
Total	150	100.0	150	100.0

Source: Elderly survey 2012

When living arrangement by place of residence is controlled for age, this study further revealed that only about 33 percent of the young elderly (60-69 years of age) live in one generation families in urban areas while about 63 percent of the oldest group (80 years and over) live in one generation families. Although majority of the elderly in both urban and rural areas tend to co-reside with children, this study further revealed that majority of the oldest age group in urban areas live in one generation families. When it is further

controlled for gender, the study showed that 39 percent of rural women live alone in one generation families compared to 44.1 percent of the urban elderly who live alone in one generation families. In contrast, only less than 18 percent of both rural and urban men live alone in one generation families.

Table 6.11 contains multiple answers because people can encounter more than one problem at a given point of time. It was found that most of the elderly have financial difficulties associated with living arrangements irrespective of the place of residence, especially among those in rural areas. The rural elderly find they do not have the emotional support expected from children when compared to their urban counterparts. In addition, ill health is reported as one of the main problems associated with living arrangements in both rural and urban areas. It is also important to find that the rural elderly are involved in more household work and hence they do not have enough rest. Similarly, there are more in ill health compared to their urban counterparts. These findings suggest that the urban elderly are less burdened in relation to financial, emotional and household duties than their rural counterparts.

**Table 6.11: Problems with Living Arrangements of Elderly by Place of Residence**

<b>Problems with living arrangement</b>	<b>Rural (percent)</b>	<b>Urban (percent)</b>
Financial difficulties	68.2	50.0
None to take care	50.0	18.8
No emotional support	45.5	18.8
Ill health	43.2	31.3
Need to do lot of household work	22.7	6.3
No rest	22.7	0.0
Problems with children	15.9	12.5
No enough facilities	9.1	12.5
No social net work	6.8	12.5

Source: Elderly survey 2012, multiple responses

#### **6.4.2 Education and Living Arrangements**

The educational level of the elderly also plays a major role in determining their living arrangements and it has been reported that the pattern of co-residence systematically diminishes with an increase in the educational level of the elderly (Pal *et al.* 2004; Andrade and De Vos 2002; Shah *et al.* 2002; Bongaarts and Zimmer 2001; Martin 1989). In general, the elderly who are less educated appear to live in traditional

extended family households compared to those better-educated. However, this study shows that Sri Lanka's elderly situation seems to be very different because there is no clear association between living arrangements and educational level indicates that a higher percentage of elderly living alone is reported to be both illiterate and those with tertiary education. This suggests that the educational level of the elderly in Sri Lanka is not a major factor determining their living arrangements, and hence it is determined by factors other than their educational level. Furthermore, it was found that most of the elderly own their homes irrespective of their educational status. Although the house types (whether it is a shanty, cadjan or brick etc.) differ it is still important that they have their own homes to live.

#### **6.4.3 Income, Savings, Expenditure, Government Financial Assistance and Living Arrangements**

One of the most important economic decisions encountered by the elderly is whether to live independently (Engelhardt *et al.* 2005). It is generally agreed that income can play an important role in determining the living arrangements of the elderly people (Kan *et al.* 2001; Chan and DaVanzo 1996). These studies point out that elderly who have poorer incomes tend to co-reside with their children because they cannot afford separate homes of their own. However, some have shown that income is not a key factor determining living arrangements of the elderly (Meng and Luo 2008). A study conducted by DaVanzo and Chan (1994), revealed that while income is positively related to living alone in most developed countries, most of the countries in the developing world, co-residence of the elderly is more prevalent, because of the cultural norms regarding family roles and filial responsibilities of the kin groups. It has also been found that those elderly who have income from various sources, such as personal savings, properties, government pensions etc. are more likely to co-reside with adult children (Ahmad and Das 2011).

In Sri Lanka, there is a significant association between the co-residing status of the elderly and their respective income status. Multiple responses obtained from the elderly on their income sources are summarised in Table 6.12. It appears that the co-residence status tends to ease income burden, and that those elderly who co-reside with children in their own home have more sources of income, especially income deriving from pensions, current employment and savings. Those who live in one generation families show that they have income from their property and money sent by their international

migrant children. In addition, those who are still employed appear to live in their own home. The study also found that more than half of the elderly are currently unemployed. Among them, the majority are poorer and hence receive government financial assistance, such as Samurdhi and Pinpadi. Most notably, those who are living alone receive more government assistance for poor people in comparison to other categories of living arrangements. The analysis found that 52.3 percent of the elderly receive financial assistance from the government. Most importantly, those who do receive financial assistance co-reside with children in their own home. However, elderly in other categories of living arrangements also receive financial support from the government but to a lesser extent.

**Table 6.12: Income Sources of the Elderly by Living Arrangements**

<b>Income source</b>	<b>Living alone in own home N=96 (percent)</b>	<b>Living with spouse only in own home N=52 (percent)</b>	<b>Living with child/ren in own home N=127 (percent)</b>	<b>Living with a child at child's home N=21 (percent)</b>
No income	11.5	9.6	8.7	19.0
Pension	14.6	25.0	31.5	23.8
Provident fund	1.0	1.9	3.9	0.0
Savings/bank interest	6.3	0.0	2.4	0.0
Income from property	13.5	32.7	18.1	9.5
Money obtained from co-residing child	N/A	N/A	27.6	28.6
Money given by non-resident children	15.6	17.3	7.1	19.0
Money sent by international migrant children	5.2	15.4	6.3	4.8
Salary from current employment	8.3	11.5	14.2	4.8
Assistance from relatives	8.3	0.0	.8	0.0
<i>Samurdhi</i> (Government assistance)	17.7	9.6	6.3	4.8
<i>Pinpadi</i> (Government assistance)	24.0	9.6	4.7	14.3

Source: Elderly survey 2012, multiple responses

This study therefore, shows that elderly who live alone are financially in a more disadvantaged position compared to those in other living arrangements. Similarly,

(Benjamin *et al.* 2000) found in rural northern China that elderly who live alone are worse off than those who co-reside. Zimmer and Kwong (2003) found in China that when traditional sources of support for the elderly are diminished, it will lead to an increase in the proportion of older adults with unmet needs. Sun (2002) also found in China that elderly living away from children limits help with daily activities and hence, the family support system faces a greater challenge in maintaining the capacity to perform its supporting function with the continuous decline of fertility and the greater mobility of children.

In developing societies, low savings of the elderly and weak pension schemes, makes life challenging for the elderly (Jalal and Younis 2014). In this study, 45 percent of the elderly have some savings. When savings status of the elderly is further examined, this study found that elders those who co-reside with adult children have more savings. It revealed that almost half of the elderly have their personal savings irrespective of living arrangement. When the analysis is extended to the expenditure pattern of the elderly by living arrangements, it was found that only 25 percent of them spend less than Rs.1,000 on their food while 75 percent spend more than Rs.1,000 per month on food. However, the food expenditure pattern did not affect the choice of living arrangement as shown in Table 6.13. Unless an effective social security system is in place, it is likely that the ageing population will spend less on consumption because of their poor saving capacity in developing societies (Mayer 2013, p. 22).

**Table 6.13: Elderly by Their Living Arrangements and Monthly Expenditure on Food**

living Arrangements	Monthly expenditure on food (Rs.)		Total
	less than 1,000 (percent)	more than 1,000 (percent)	
Living alone in own home	21.6	78.4	100
Living with spouse only in own home	24.5	75.5	100
Living with an child/ren in own home	21.7	72.9	100
Living with a child at child's home	23.8	76.2	100

Source: Elderly survey 2012

Although the majority of elderly spend more than Rs.1,000 on their food, only 39.3 percent spend more than Rs.1,000 on their health (Table 6.14). The provision of free healthcare at government hospitals and many young aged and relatively healthy can be

attributed to less expenditure on health by the elderly. The elderly who are living alone were found to spend less on their health. However, overall co-residence shows higher expenditure on health. This suggests that those who are unhealthy seem to be more likely to co-reside, especially with an adult child in their own home. Further analysis of data shows that the majority of those who do not have any illness (40.5 percent) live alone in their own home, while those who are poorer health (44.4 percent) tend to live with a child co-residing in their own home. This is mainly because the majority of the elderly have at least one illness and among them a significant majority tend to live in their home with an adult child or at the child's residence. It was found that elderly tend to live with their adult children when their health status is poor. As discussed previously, the ongoing epidemiological changes, such as the shifting burden of illness toward non-communicable diseases and injuries, can have significant effects on the quantity and type of health services required (Mosley *et al.* 1993). Therefore, these trends can increase cost pressures on health care systems in Sri Lanka.

**Table 6.14: Elderly by Their Living Arrangements and Expenditure on Health**

Living arrangement	Monthly Expenditure on Health (Rs.)		Total
	less than 1,000 (percent)	more than 1,000 (percent)	
Living alone in own home	55.7	44.3	100
Living with spouse only in own home	35.8	64.2	100
Living with child/ren in own home	43.4	56.6	100
Living with a child at child's home	42.9	57.1	100

Source: Elderly survey 2012

The social theories of ageing suggests that the active involvement of the elderly in social relations and in partaking in social activities is an essential pre-condition for successful ageing (Bergstrom *et al.* 2000). This study found that 80 percent the elderly spend less than Rs.1,000 per month on social activities. Among them, those who live in one generation families spend less than the elderly who co-reside with children. The

elderly can have more than one leisure activity so multiple answers were obtained in this regard (Table 6.15). Watching TV and visiting neighbours are the two main leisure activities for all the living arrangement categories but those who co-reside with children read newspapers more than those who live in one generation families. The first two

activities are not costly and living with adult children also can allow reading news papers without any cost because children purchase them. Involvement in social work appears to be very less compared to other leisure time activities. However, those who co-reside with an adult child in their own home tend to be involved in more social activities because of the support of their co-residing children. It was found from this analysis that the majority of elderly (82 percent) spend less than Rs.1,000 on other things, and that those co-residing with child in their own home had more capacity to spend on other things. This is because of the two way support between the elderly parents and their adult children. Overall, the expenditure patterns of the elderly show that co-residing with children benefit more than those who are living alone.

**Table 6.15: Elderly by Their Living Arrangements and Leisure Time Activities**

<b>Leisure time activities</b>	<b>Living alone in own home N=96 (percent)</b>	<b>Living with spouse only in own home N=51 (percent)</b>	<b>Living with child/ren in own home N=129 (percent)</b>	<b>Living with a child at child's home N=21 (percent)</b>
Watching TV	57.3	68.6	70.5	57.1
Reading papers	27.1	27.1	41.2	41.9
Visiting neighbours	25.0	25.0	37.3	18.6
Involved in social work	10.4	10.4	21.6	13.2
Visiting religious places	21.9	21.9	25.5	31.0
Other	32.3	32.3	27.5	27.9

Source: Elderly survey 2012, multiple answers

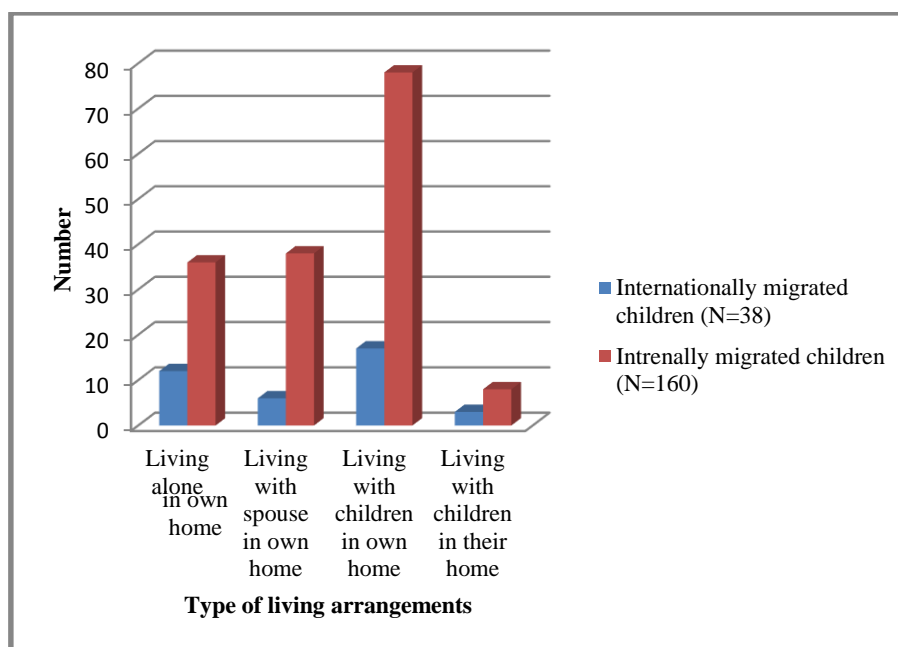
## 6.5 Migration and Living Arrangements

There is a growing interest in migration and living arrangements of the aged, since there is considerable migration taking place among young and middle aged adults (Zhuo and Liang 2006). Therefore, it is interesting to explore the impact of migration on the well-being of the elderly in Sri Lanka. When reviewing the literature on migration and the elderly, some attention has been given to the impact of migration on elderly who are left behind because of the migration of their children (Zhuo and Liang 2006). Although elders are not usually involved in migration, the migration of their adult children do affect the lives of the elderly (Qin *et al.* 2008; Zhuo and Liang 2006). Figure 6.4 shows



that the majority of elderly have many children who have migrated, especially within Sri Lanka but some have undertaken international migration.

**Figure 6.4: Elderly by Living Arrangements and Number of Children Who Have Migrated Internally and Internationally**



Source: Elderly survey 2012

Table 6.16 shows that the elderly who live with a spouse in their own home have more internal migrant children than others, while those who are living with their childrens' home have the least internal migrant children. In addition, the most international migrant children are evident for the elderly who co-reside with children in their own home, while the least is observed for those who live with children in their home. Overall, the internal migration of the children can be regarded as a dominant factor determining the living arrangements of the elderly. However, the effect of international migration on the well-being of the elderly cannot be disregarded as those elderly who live alone also have a more number of children who have gone to another country. One could reasonably hypothesise that some elderly who live alone have been left in their own home because their children have migrated overseas.

**Table 6.16: Elderly by Living Arrangements and the Internal and International Migration Status of Children**

Status	Living alone in own home N=57 (percent)	Living with spouse only in own home N=47 (percent)	Living with adult child/ren in own home N=128 (percent)	Living with adult child at child's home N=21 (percent)
Internal Migration				
Children have migrated	63.2	80.9	60.9	38.1
Children have not migrated	36.8	19.1	39.1	61.9
Total	100.0	100.0	100.0	100.0
International Migration				
Children have migrated	21.1	12.8	13.3	14.3
Children have not migrated	78.9	87.2	86.7	85.7
Total	100.0	100.0	100.0	100.0

Source: Elderly survey 2012

Further analysis of migration showed that a substantial proportion had migrated to places within the Galle district which accounted for 30.4 percent of the total internal migrants. It was also observed that 37.8 percent of them had parents living alone or with a spouse in their own home. The following case studies revealed the impact of migration on the well-being of the elderly.

Soma is 72 years old and lives with her husband who is 78 years old now. They have four children. Three children have migrated to other places in Sri Lanka, while the other has gone to Italy. Those who have migrated within Sri Lanka are married. They have given their property to children and have given the house to the youngest son who is living in Italy. They are living peacefully and engaging in religious and social activities, while helping people in the community. Both of them were teachers and hence they receive a pension. Their children do not have any financial issues, and often communicate with them over the phone. However, they feel unhappy because they cannot live with their children. Although they do not have financial issues they are suffering from loneliness and some health problems. They expect their son to return back to Sri Lanka soon. When they need some emergency help, neighbours help them. They cannot go to live with other children since they have to look after their property in the village. Currently they are suffering due to the migration of their children; within and outside the country. (C 4, Respondent 159).

The case studies suggest that those elderly who are living in one generation families are often looking after their childrens' properties after they have migrated and suffer from

loneliness and health issues. Furthermore, international migration of children who left their family (grand children) with their elderly parents can adversely affect the well-being of the elderly through many social issues as revealed in the following case study.

Piyasena is 68 years old and his wife is 65 years old. They have two children and their younger daughter's family is living with them. The elder daughter has migrated to another district. The younger daughter has migrated to a Middle Eastern country for employment. Her family (husband and two sons) in Sri Lanka live with Piyasena and his wife. Her husband is a drunkard who is not doing a proper job and troubling the family. They are now in a very helpless situation because they cannot repeat these bad stories to their daughter. They also do not have a proper income and hence Piyasena goes for cleaning work when he is in good health. It is not a permanent income. Although, they have advised their son-in-law to behave he doesn't care, and is also going after women as well. So they have a big responsibility to look after their grandchildren until her daughter returns to Sri Lanka. Because of the bad behaviour of the son-in-law, the elder daughter also doesn't like to visit them. They are in a very unpleasant situation because of her daughter's migration to a Middle Eastern country for employment. Piyasena and his wife are not in good health and are very apprehensive about their uncertain future (Case 9, Respondent 16).

It has been pointed out that the children of such migrant mothers left in the care of grandparents, mainly grandmothers who themselves need greater attention in their old age with physiological, psychological and emotional problems, that tend to be precipitated by socio economic constraints (United Nations 2007a).

## **6.6 Institutionalised Elders**

Although the main focus of this study is on elders who are living in community settings, by looking at those in institutional care can help in an understanding of the circumstances under which certain elders may seek such care (World Bank 2008; NSE 2004; Silva 2004). Investigation of the reasons for the institutionalisation of the aged provides an opportunity to find the factors that influenced them to be institutionalised. The National Survey on Elders, 2004, found that about 16,000 older persons were likely to seek shelter in aged homes in the future. Siddhisena (2014) indicated that the number of institutionalised aged people during the last two decades has grown considerably. Silva (2004) showed that there is already a waiting list for those institutions. It has been reported that local NGOs are the primary providers of institutional care for the elderly in Sri Lanka (World Bank 2008). Moreover,

Samarasinghe (2007) has reported that there are 300 aged homes in Sri Lanka while the National Secretariat of Elders has registered 162 such homes. These homes are mainly managed by religious organisations, philanthropic families or trusts (World Bank 2008, p. 27).

In this study, focus group discussions were carried out in two aged homes which are located in urban and rural settings of the Galle District. These found that the majority of the elderly who are residing in aged homes have never married or are childless. Similarly, it was also observed that in a survey undertaken by CENWOR (1997) of a sample of residents in 10 institutions, found that 56 percent of the aged were either never married or if married had no living children/childless. Another important finding observed from the focus group discussions was that the majority of the aged are at advanced ages and they did not have family members visiting them. It was also observed that the residents in the aged homes were seen as “destitute”, as they had been compelled to join these institutions without anyone to take care for them (Silva 2004). Females outnumbered males in the two institutions in which the focus group discussions were carried out. It was also been reported by Eriyagama (2000) that although gender distribution of the residents generally varies from institution to institution, overall women outnumbered men in those institutions.

When analysing personal characteristics of the aged who were in the aged homes, it was found that they are mainly never married, childless and widowed. The following factors were cited as the key demographic, social and economic that influenced them to be institutionalised as shown in Table 6.17. It is discernible from the majority of factors that elderly parents have decided to be institutionalised due to non-respect of their children. This is further aggravated by their poverty status. It appears that those elderly have been forced to go to aged homes since there was no any other option available for them.

**Table 6.17: Demographic and Socio-economic Factors Influencing Institutionalisation of the Elderly**

<b>Demographic Factors</b>	<b>Social Factors</b>	<b>Economic Factors</b>
Old-old age group	Conflict with children and relatives	Poor income or no income
Never-married	No one to look after	
Widowed	Do not want to burden the families of adult children	Cannot bear the health cost
Childless	Harassment by children	Cannot work for earnings
	Harassment by relatives	
	Poor health	
	No respect by the family and the society	

Source: Focus Group Discussions by the Author

Similarly, the World Bank (2008, p. 27) has found that aged parents have fewer children or no children, the demand for formal sector employment of their children and changing life styles are the main reasons for their institutionalisation. The Focus Group Discussion found that the main reason for the elderly to be institutionalised is the unpleasant situation of their living environment and lack of respect from their children. Their own terms in this regards are:

“when we were small; our families were living together in the ancestral homes including our parents and siblings, and other immediate extended family members such as uncles, aunties, grandparents etc.. This was a cultural norm where the elderly family members get the due respect by the younger family members living in the same household. Currently this trend has changed where the elderly children start their independent lives. As a result the bond and the respect for immediate nuclear family members increased while it decreases for the extended family members”.

When they were asked whether they would like to live with their children, they said they would but the unpleasant experiences they had encountered made them move to an aged home. Those who were in ill health are suffering because they need assistance to fulfil their daily needs. However, the study observed that the young-old are helping the oldest-old in these institutions. The focus groups further showed significant intergenerational differences in lifestyle and emotional differences are likely to enhance the generational disparities in the future. The weakening of the traditional family role in Sri Lanka (Amarabandu 2004; Silva 2004) has led to the aged being left alone in institutions. Accordingly, this trend will continue in the future with the increase of

ageing population. The notable incidence of elderly couples or single elders living alone may partly reflect this tendency (Silva 2004).

## **6.7 Conclusion**

This chapter examined the factors influencing the living arrangements of the elderly in Sri Lanka. It was found that a substantial proportion of the elderly live in their own home but with an adult child/ren. In addition, many children move away from their parents' home after marriage and tend to live in close proximity. The impact of migration of the adult children on the living arrangements of the elderly is substantial because the majority of those living in one generation families had migrant children. The survey found that more elderly women live alone than elderly men and the majority of them are widowed because of the higher life expectancy of females than their male counterparts. Moreover, a significant proportion of elderly living alone, and living with a spouse encountered difficulties by having no children to take care of them as they aged. It was also revealed that the presence of a larger number of children gave a higher chance for the elderly to co-reside with children. It was also found that most of the elderly have financial difficulties associated with living arrangements irrespective of the place of residence. This study found that those elderly who co-reside in their own home have more income sources and savings. This study further found that co-residence status has eased the financial burden of the elderly. In terms of expenditure on health, it was found that those in poor health seem to be co-residing, especially with an adult child in their own home, and they tend to be involved in more social activities because of the support of their co-residing children. When analysing personal characteristics of the elders who are living in institutional care, it was found that an unpleasant situation in their home with children had made them move to in an aged home or indeed many had no children.

It is also apparent from this analysis that the majority of elderly still have not reached advanced age, and has not exhausted their wealth that they have accumulated by the time they reach 60 years of age. Therefore, one can hypothesise they are still less dependent on their children for financial support at this stage. In this respect, it is interesting to explore how elderly parents and their adult children support each other through wealth transfers because the direction and volume of such transfers can influence the well-being of the elderly. This aspect is examined in detail in the next chapter.

## CHAPTER 7

### TRANSITION OF THE WEALTH TRANSFERS: FROM TRADITIONAL TO MODERN SOCIETY IN SRI LANKA

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#### 7.1 Introduction

The main objective of this chapter is to examine the changing pattern of wealth transfers between parents and children in traditional Sri Lankan society compared to that in society today. It was previously shown how the Sri Lankan family has changed in terms of its type, structures and roles during the post-independence era along with socio-economic changes. Caldwell's wealth flow theory (1982) discusses intergenerational transfers across the life course by examining the changing value systems in traditional society, where the family economy is the main mode of production and the shift to a modern society in which capitalist production is the major type of production (Caldwell 1982). Caldwell's theory explicitly incorporates the effects of changing value systems of status and political position on the wealth of the respective societies. Caldwell (1982, p. 140) further argues that changes in wealth transfers across the life course result in changes to the net flow of wealth between generations. Most importantly, Caldwell (1982, p. 388) recognises the changing economic value of children and shows that the desire to have many children decreases as the cost of educating and bringing them up increases. Caldwell (1982) further showed that formal education changes the traditional familial culture by transforming the morality governing the relationships between members of the patriarchal family. His five postulates<sup>16</sup> through which education has an impact on fertility, describe how education restructures family relationships and hence, family economies and shifts the direction of the net intergenerational wealth flow (Caldwell 1982, p. 303). He also claimed that value systems in relation to old-age support and the changing role of the family are the primary determinants of intra-familial wealth flows. This study provides an opportunity to understand the main features and dimensions of variation of wealth

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<sup>16</sup> 1. reduces the child's potential for work inside and outside

2. education increases the cost of children far beyond the fees, uniforms, and stationery demanded by the school

3. schooling creates dependency, both within the family and within the society

4. schooling speeds up cultural change and creates new cultures

5. the contemporary developing world, the school serves as a major instrument- probably the major instrument- for propagating the values, not of the local middle class, but of the Western middle class (Caldwell, John Charles 1982)Caldwell 1982, p. 303-304.

transfers between traditional and modern society in Sri Lanka. In this respect, it is necessary to examine the traditional society as a production system which differs from that of modern society. The changes in the dimension of socio-economic inequality will also be examined. Most importantly, as Caldwell has emphasised, the relationship between value systems and old-age support in these societies by the changed economic value of children.

## **7.2 Theoretical Underpinning: Patterns of Wealth Transfers in Traditional and Modern Society**

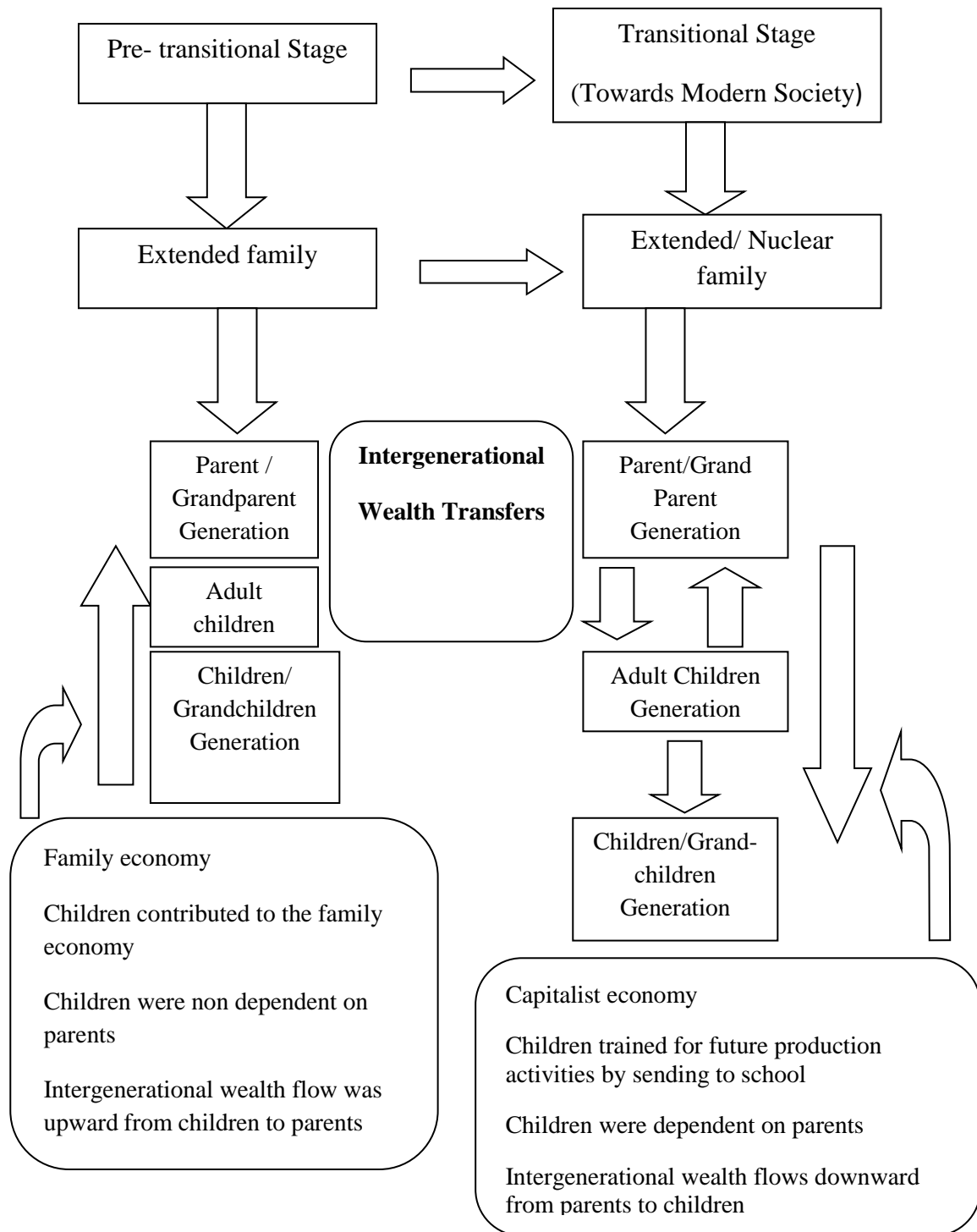
Hugo (2002, p. 15) emphasises the importance of the transition from an “emotionally extended” to an “emotionally nucleated” family, with primary loyalties being upward from children to parents in the former, while nucleation of family sees primary loyalties and obligations swing towards wife and children. Hugo (2002, p. 15) with the support of Indonesian data suggests that,

“This transition has been very rapid in parts of Indonesia and has been facilitated by mass education, mass media (which is constantly presenting to people Western nuclear family models) and the decline of the family as the unit of production, which has reduced patriarchal control over the work and earnings of their children and grandchildren”.

Dissanayake (1995), using Caldwell’s thesis (Caldwell 1982) on ‘mass education and fertility transition’ shows that the onset of the fertility transition coincided with changes in the Sri Lankan family accompanied by the onset of mass schooling in the mid-1940s. In the theoretical chapter, it is clear that Caldwell’s wealth flow theory of fertility decline and its further extension proposed by Hugo (1997), provide an appropriate theoretical base to explain the relationship between the changing role of the family and an ageing population in Sri Lanka. As Dissanayake (1995) claims, the Sri Lankan family has made the transition to the nuclear family during the fertility transition. There was a change in the direction of the net wealth flow between parents and children due to the following factors: changes from the family economy to a capitalist economy; children were trained for future production activities by sending them to school, unlike previously when children were already producers under the traditional family, and children became increasingly dependent on parents. These changes produced a downward turn in the intergenerational wealth flow as depicted in Figure 7.1.



**Figure 7.1: Flow of Intergenerational Transfers in the Traditional Society and the Modern Society**



Source: Adopted from Caldwell 1982 and Hugo 1987

Figure 7.1 demonstrates the changes occurring in the society over time and the direction of the intergenerational wealth flows. The society in the context of pre-transitional and transitional stages changes over the time, whereby the extended family which prevailed

in the pre-transitional stage gradually evolves into a nuclear family type during the transitional stage. Therefore, it can be observed that there are both extended as well as nuclear families during the transitional stage. In the extended family the net flow of generational transfers are upwards because of the prevalence of the family economy where children are regarded as producers, so parents benefit from their children. In contrast, during the stage where family is evolving from extended to more nuclear families, children become future producers because of the changing status of mode of production from the family economy to capitalist production. During this stage children become more costly to the parents and hence the direction of the intergenerational wealth transfer is from parents towards children.

### **7.3 Differences between the Present “Elderly Parent” and “Adult Children” Generations**

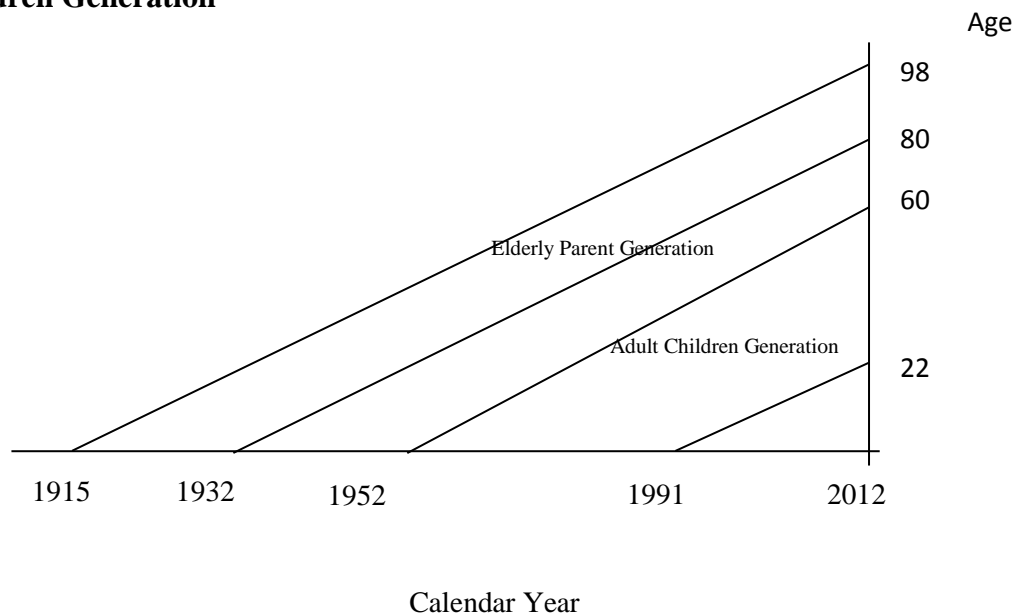
An examination of the demographic and socio-economic characteristics of the elderly and their adult children generation is necessary in order to understand how these two generations differ from each other, and whether such differences are reflected in intergenerational relationships/transfers. Umberson (1992, p. 665) showed that family structure, socio-economic resources and socio-cultural influences affect the quality and importance of intergenerational relationships between the “elderly parents” and “adult children” generations. Further, the marital status of parents and children may introduce strains on the quality of intergenerational relationships (Umberson 1989). The reliance of each on the other depends on their relative socio-economic status, and such reliance can be a strain or foster closeness in intergenerational relationships (Rossi 1990; Treas and Bengtson 1987). Some studies have suggested that gender also shapes the life experiences of these respective generations (Hughes and Hertel 1990; Williams 1985). Furthermore, Williams (1985) showed that there is strong evidence that the social-structural experiences of women lead them to be more involved in, and more responsive to, relationships with their children than men. Umberson (1992) showed that age is a social stratification variable which is strongly associated with life experiences. In qualifying this proposition, Umberson (1992) argued that as parents become older they frequently encounter retirement, reductions in income, the prospect of grandchildren, and impending death. Lee (1994, p. 1027-1028) suggested that,

“at each age, earning in excess production augments wealth, while consuming in excess of earning reduces wealth or increases debt. In this way, discrepancies between planned life cycle trajectories of earnings and consumption generate, at each age, a demand for the wealth or debt necessary to achieve the life cycle plans”.

Subsequently, these factors can contribute to the type of relationship that elderly parents and their adult children develop between each other.

These propositions suggest that the relationship between the elderly parents and their adult children represents a set of unique social-structural features. Accordingly, it is important to define the generations under study with their unique characteristics before the commencement of the analysis of intergenerational wealth transfers. Two generations are considered here: the elderly who are aged 60 years and above and the adult children generation who are between the ages of 22 and 59 years in 2012. For analytical purposes and convenience, they are shown in the following lexis diagram (Figure 7.2) in order to differentiate them by birth cohort which will help to identify their unique characteristics by looking at their exposure to various important events at different points in time.

**Figure 7.2: Lexis Diagram Depicting Elderly Generation and Their Adult Children Generation**



In this study those who were born during the period 1915 and 1951 are defined as the elderly population and those who were born during the period 1952 and 1991 are their adult children generation. However, it is important to note that those who were born before 1932 and were aged above 80 years in 2012 are identified as the elderly who were exposed to the traditional society which existed before the 1930s. Dissanayake

(1995) has shown that major changes to the Sri Lankan family occurred during the pre-transitional fertility regime which can be seen after the 1930s. Therefore, when examining the transition of the intergenerational wealth flows from traditional to modern society, identification of the cohorts that belong to both traditional and modern societies is imperative. Such demarcation seems valid by looking at the duration of the respective birth cohorts.

Once, the generations are defined, their respective demographic and socio-economic characteristics are identified. Table 7.1 shows that the two generations significantly differ from each other according to the respective demographic and socio-economic characteristics. It is important to note that a large number of people will enter the older age groups in the future because of the rapid ageing process taking place in Sri Lanka.

It was found that almost 50 percent of the elderly population was concentrated in the young old category (60-69 years). This is because of the recency of the rapid growth of the aged in Sri Lanka, and most of them are still economically active and contributing to the family income. Overall 15.3 percent of them were still employed with a high 75.4 percent of those aged 60-69 employed at the time of the survey. Fewer men were found among the elderly generation because of the sex differentials of mortality currently prevailing in Sri Lanka which favour women. The sex ratio of the adult children is almost similar to that of the national population. When marital status is examined, a large proportion of the elderly are widowed because of the higher male adult mortality. In addition, a substantial proportion of the never married population were found among the elderly generation. This is mainly due to the imbalances in the sex ratio created by high levels of mortality which occurred before 1946 due to epidemics experienced during the first stage of the epidemiologic transition in Sri Lanka (Dissanayake 2000a). Such an imbalance created a 'marriage squeeze' in Sri Lanka which meant some people did not have opportunity to marry. The current generation of adult children did not experience such an imbalance so most of them are currently married. Since they are still below the 60 years of age, the proportion widowed is low.

**Table 7.1: Demographic and Socio-economic Characteristics of the Elderly and Adult Children Generations in Household Survey**

<b>Characteristics</b>	<b>Elderly Generation (percent)</b>	<b>Characteristics</b>	<b>Adult-Children Generation (percent)</b>
<b>Age in 2012</b>		<b>Age in 2012</b>	
60-69	47.2	22-29	14.7
70-79	35.4	30-39	26.6
80 and over	17.0	40-49	33.5
		50-59	24.8
<b>Sex</b>		<b>Sex</b>	
Male	34.9	Male	47.3
Female	65.1	Female	52.7
<b>Marital Status</b>		<b>Marital Status</b>	
Currently Married	53.3	Currently Married	89.3
Divorced/Separated	0.9	Divorced/Separated	0.0
Widowed	26.6	Widowed	2.5
Never Married	19.2	Never Married	8.2
<b>Place of Residence</b>		<b>Place of Residence</b>	
Urban	45.5	Urban	50.5
Rural	55.5	Rural	49.5
<b>Educational Status</b>		<b>Educational Status</b>	
No Schooling	6.1	No Schooling	0.6
Primary Education	30.6	Primary Education	4.7
Secondary Education	29.3	Secondary Education	27.9
Passed GCE O/L	18.8	Passed GCE O/L	29.5
Passed GCE A/L	12.2	Passed GCE A/L	33.5
Tertiary Education	3.1	Tertiary Education	3.8
<b>Activity Status</b>		<b>Activity Status</b>	
		Student	1.9
Household Work	27.5	Household Work	34.5
Unemployed	1.7	Unemployed	4.4
Employed	15.3	Employed	58.0
Unable to work	50.2	Unable to work	0.6
Other	5.2	Other	0.6

Source: HH survey of the elderly (N=888); HH survey of the adult children (N=573); elderly survey 2012 (N=300) and Adult children survey 2012 (N=150)

Moreover, the survey found that more elderly people lived in rural areas compared to their childrens' generation, suggesting contemporary rural to urban youth migration has occurred, due to marriage, education and employment opportunities as shown in the recent 2012 census results (Department of Census and Statistics 2013a). It is obvious that the children generation is more educated than their parents with more educational opportunities provided to them after the mid-1940s with the onset of mass education in Sri Lanka (Dissanayake 1995). The educational status of the elderly shows that more of them had primary or no schooling compared to their adult children who had more

secondary and tertiary level qualifications. Moreover, survey found that most of the elderly are not economically active and hence engaged in household work compared to their adult children who were likely to be employed although a substantial proportion among the elders were still employed. Overall, the adult children cohort differs in almost every dimension from their elderly parent generation.

## **7.4 The Changing Pattern of Wealth Transfers between Parents and Children**

Production systems in traditional society are based on a family economy and thus family becomes the economic unit (Hare-Mustin 1988). Traditional agriculture values the labour of children in its production system (Boserup 2005; Clark 1967). Therefore, in traditional agricultural societies the economic contribution of children and child labour enhances the family economy (Nag *et al.* 1978; Caldwell 1976a; Mueller 1976). Sri Lanka during its pre-transition fertility regime was characterised by family based production (Dissanayake 1995, p. 148). Dissanayake (1995) further showed that Sri Lankan traditional society was organised according to a caste-based structure in which each caste was assigned a specific economic activity, and this prevailed until the onset of mass education in the mid-1940s. Most economic activities took place within the household, production and distribution were organised by custom and traditions. In such a society the family played a central role, since economic and social status was defined by birth, family ties and local customs. Dissanayake 1995, p. 148 stated,

“Social status as well as economic status in pre-colonial Sri Lanka was determined by birth. A person’s birth into a particular caste ascribed his or her status because caste designation was related to the service that person was supposed to perform. .... The hierarchical caste system indicated the social status of the occupation”.

This study included three age cohorts, namely those who were born before 1932, born in the periods 1933-1942 and 1943-1952, respectively. Therefore, those who were born before 1932 were in the traditional society category which existed before the onset of mass education in the mid-1940s, which was regarded as the major force that destroyed traditional family morality and created a new familial culture in Sri Lanka (Dissanayake 1995, p. 311). Dissanayake (1995, p. 310), empirically tested and proved that,

“With the onset of mass schooling, children schooling induces changes in the relationships between the members of the family and hence the family economy and the direction of the intergenerational wealth flow”.

The survey gathered information from those who were born before 1932 or who were aged 80 years and over at the time of the survey in 2012. Their opinions on the question of ‘whether children contributed to the household or family economy during those days’ are shown in Table 7.2. Most importantly, it shows that 81.8 percent of these elderly parents aged more than 80 years, agreed that children in their generation contributed to the family economy. It is also interesting to note that some 18.2 percent disagreed. This can be regarded as an indication that the transition from traditional family morality to modern family morality may have been underway.

**Table 7.2: Opinion of the Elderly (Born Before 1932) on Childrens’ Contribution to the Family Economy During Their Younger Days**

Opinion	Percentage
Totally agree	10.9
Agree	50.9
Somewhat agree	20.0
Disagree	16.4
Totally disagree	1.8
Total (N=55)	100.0

Source: Elderly survey 2012

Ryan (1952, p. 23) in a study in the 1950s showed that the majority of parents viewed children as an economic asset to the economic survival of the family. Children in the traditional society were seen to contribute more to the family economy. Parents with low educational levels who were the majority during that period, also valued their childrens’ education highly. Dissanayake (1995, p. 180) suggested that,

“.. in the 1950s families had started to move away from the traditional family morality where the child was regarded as a present producer, to a new type of family relationship where child was regarded as a future potential or potential producer”.

It is clear from Dissanayake’s study that the onset of mass education made a great impact on the direction of the net flow of wealth in Sri Lanka when the society changed from its traditional to modern status. Dissanayake 1995, p. 181, claimed that,

“..the onset of mass education began to have a significant impact on the family economy once parents started to send more of their children to school after 1945. Hence, the net wealth flow was moving upward towards children since more of their children began to attend school”.

In this context, Caldwell (1982, p. 303-305) showed that school children are less productive and more costly both to the family and to society. This study also found that elderly parents accepted that it is more costly now to bringing up children as shown in Table 7.3, indicating that 99.7 percent agreed with this statement with almost 50 percent in total agreement.

**Table 7.3: Elderly Response to ‘it is costly to bringing up children today’**

<b>Statement</b>	<b>Percentage</b>
Total agree	47.0
Agree	49.3
Somewhat agree	3.4
Disagree	0.3
Total (N=298)	100.0

Source: Elderly survey 2012

Caldwell (1982, p.303-305) further claimed that childrens’ schooling creates dependency, both within the family and also within the society, as children become less productive and costly during their educational years. This dependency significantly impacts on the net intergenerational wealth flow. This study revealed that children have become dependent until they become adults and find employment as shown in Table 7.4. In other words, the recent generation of children in modern society, unlike the children in the traditional Sri Lanka, are dependent on their parents until they complete their schooling and find productive non-familial employment.

**Table 7.4: Elderly Response According to Their Childrens’ Dependency During the Life Course**

<b>Dependency</b>	<b>Multiple Responses (N)</b>	<b>Percentage</b>
Until became adults	119	39.3
Until find employment	130	42.9
Still dependent	39	12.9
Other	15	5.0
Total	303	100.0

Source: Elderly survey 2012

It is clear from the field study that children have become increasingly dependent after changes have occurred in the family. When examining the child dependency status of the oldest cohort (who was born before 1932) it was found that 24 percent had dependent children in those days compared to some 76 percent of the elderly those who are currently in the young-old cohort.



The analysis further showed that children were dependent financially, materially, emotionally etc. on their parents as shown in Table 7.5. As Caldwell (1982) and Dissanayake (1995) mentioned, children who are dependent, mainly during their school days, become very costly to parents which is one of the primary determinants of the changing direction of the intergenerational wealth flow. Caldwell's thesis on intergenerational wealth flows, shows clearly that Sri Lanka's modern society consists of dependent school children who are being trained for future production activities unlike in the traditional society, which had children who were contributing to the family economy. The analysis shows that the family gradually transformed from being a unit of production to being a unit of consumption. Therefore, children are no longer viewed as economic assets but rather as liabilities. Table 7.5 shows the percentage of elderly according to various types of help extended to their dependent children during the life course. From the table it is clear that the majority of elderly have provided both financial (39.9 percent) and material support (31.9 percent ) to their dependent children. However, they have also extended their emotional support to a considerable extent for their dependent children. This suggests that children have become more and more dependent on their parents in the recent times.

**Table 7.5: Elderly According to Various Types of Help Extended to Their Dependent Children During the Life Course**

<b>Type of help</b>	<b>Multiple responses (N)</b>	<b>Percentage</b>
Financial	243	39.9
Material	194	31.9
Emotional	167	27.4
Other	5	0.8

Source: Elderly survey 2012

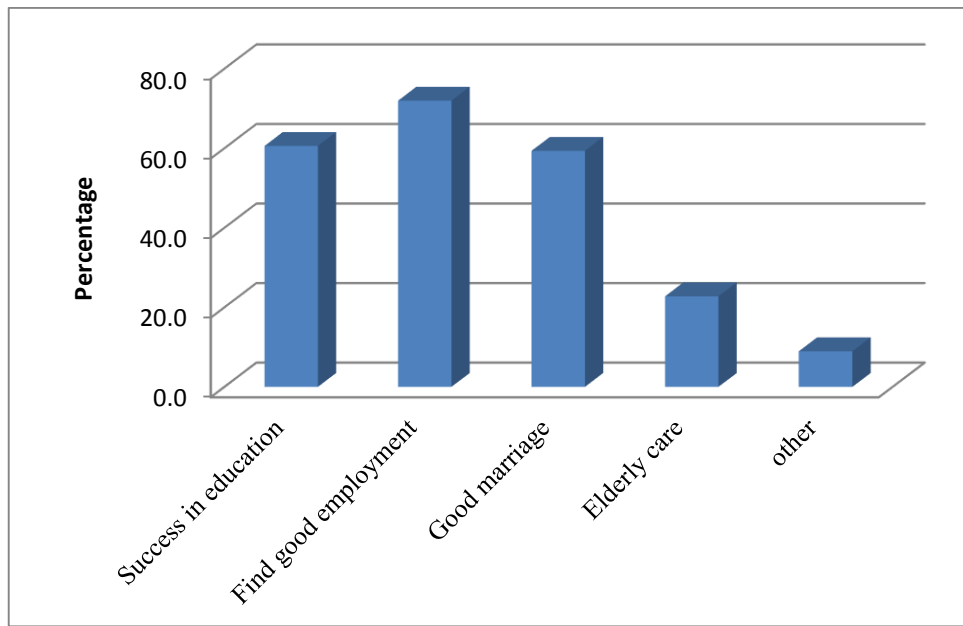
When children become dependent in the modern family, parents have to spend a considerable amount of money for their education as suggested by Caldwell (1982). This study found that parents have financially invested in their childrens education until they complete their education. This is mainly because childrens' education has been highly valued by parents in Sri Lanka after the onset of mass education from the mid 1940s (Dissanayake 1995; Puvanarajan 1994). As discussed previously, Dissanayake (1995, p. 226) showed that the primary determinant of the transformation of society from traditional to modern was the western education system:

“... the school system trained children for capitalist production activities rather than family production activities. The traditional family morality that sustained family production was moving away from families as school as children were being trained for new social place in a new culture. The first generation with mass schooling were learning mostly British middle class values since the schools adopted a British curriculum until the late 1960s”.

It is also the responsibility of Sri Lankan parents to undertake the marriage expenses of their childrens' wedding ceremonies (Anderson 2007). Therefore, parents have to assign considerable amount of money for their childrens' education and wedding expenses from their income and savings. The survey found that more than 90 percent of adult children today have received financial support for their education and marriage. This suggests a long duration of dependence of the children on their parents.

It is interesting to reveal the parents' expectations, by investing in children for their education and other expenses for a long period of time until they become economically independent. The elderly parents were asked about what they expected from their children in return for investing a substantial amount of money during the life course. The answers are shown in Figure 7.3 whereby the parents expected their children to study well, find employment and have a good marriage. This study found, that 60.6 percent of parents are expecting their children to be educated, 72 percent of parents are expecting them to be employed accordingly and 59.3 percent of the parents are expecting them to find a suitable marriage partners. This was already observed in an earlier study that the heavy investment of parents in their childrens' education was the major factor that influenced the nature of the Sri Lankan society to move away from its traditional standing (Dissanayake 1995). Most importantly, the study found 22.8 percent of the parents expected elderly care from their children although they have invested in children heavily during their life course. It has been pointed out by analysing Asia-Pacific data, that the elderly are relying less on support from their families than they did in the past (Mason *et al.* 2011).

**Figure 7.3: Elderly According to Various Types of Expectation of Their Children**



Source: Elderly survey 2012

According to the wealth flows theory of fertility decline (Caldwell 1982), it is expected that parents receive benefits from the adult children during the second part of the life course. This study found that it is not easy to generalise such behaviour. One case study suggested that the majority of elderly parents do not expect support from their adult children because they realise that the adult children are financially constrained to support their parents as indicated from the following respondent:

Gunasena is an elderly man who is 64 years old and his wife Piyaseeli is also 64 years old. They have three adult children. The two older children (son and daughter) are married and live separately with their families, while the youngest daughter who is 19 years old still lives with Gunasena and Piyaseeli because she studies in a Technical College. Gunasena and Piyaseeli were both teachers and live on their pensions in their own house. They still support their children whenever they need some assistance. They visit their children frequently since they like to see their grandchildren. They are active members of the Elder's Society in their village and being a school teacher he holds the chairmanship of that society. Therefore, they are aware what the other elderly villagers feel about the help expected from their children. They said that adult married children have financial difficulties due to the high cost of living for housing, food, clothes and childrens' schooling and transport. Therefore, they are not in a position to look after the well-being of the elderly parents. It is not because they do not respect us, but due to time and financial constraints. Therefore, the majority of elderly now do not expect any support from their children because of their inability to support their elderly parents. (Case 10, Respondent 28).

In contrast to the above, the following case study reveals that some elderly parents expect support from their children although they feel that they should not expect it because on their adult children who live with their families are under difficult economic conditions. However, it appears that the older elderly tend to expect support from their adult children:

Appuhamy is a 82 year old elderly man who lives with his wife (Sumanwathi) in their own house. They have four children but three of the children live in another district; but the youngest son lives with his family in close proximity. Appuhamy and his wife are of the opinion that the elderly should burden their childrens' families because the parents spent money to educate the children and carried out all the activities including marriage in order for the children to lead a respectable life in society. Although in their retirement they expected some support, especially from their children to attend to urgent matters such as taking them to hospital, they never expected money from children because they thought their children needed to establish a strong stable financial situation. Appuhamy and Sumanawathi say that, after marriage, the children have separate families; hence they need to take care of their own families. However, since the parents are getting older, they expect someone to attend to their daily activities (Case 3, respondent 205).

It is important to establish whether there is a continuation of the downward direction of the transfer of wealth from parents to children by examining the spending patterns of adult children on their dependent children. Table 7.6 shows that the average monthly household income of the adult children is Rs. 27,389.35(USD 210). Further, the study gathered information on the monthly expenditure on various activities associated with their children. Parents today were found to spend 22.3 percent of their monthly income solely on childrens' activities, mostly food, clothing and education. The majority of expenses (51.8 percent) were spent on childrens' food and clothing, while the second highest item was education (37.6). It is understandable that expenses on health are lower because of the free health facilities provided by the government.

**Table 7.6: Average Monthly Expenditure of the Adult Children Generation on Their Dependent Children**

Item	Average monthly expenditure (Rs.)	Percentage from the total expenditure
Food and clothing	3156.43	51.8
Health	464.09	7.6
Social activities	66.76	1.1
Education	2292.09	37.6
other	115.09	1.9
Total	6094.46	100.0

Source: Adult children survey 2012

## 7.5 Changing Value Systems and Old-age Support

According to Caldwell (1982), parents' expect economic benefits from their children during old age and such benefits motivated high fertility in traditional societies, where it was the cultural norm for the adult children to support their elderly parents. In modern society, however, it is argued that this expectation is deteriorating because of the changing nature of the roles of the family (Hugo 1997). Demographic changes together with rapid socio-economic development have brought about a decline in close family relationships which affects the well-being of the elderly in Asia (NIA 2011). In order to investigate this aspect in detail, two questions were asked in the survey: *do your children respect you in your old age?* and *does the society generally respect aged people?*. It was found that 88.3 percent of the elderly are of the opinion that their children respect them whereas 62.8 percent claimed that society generally respects aged people. This suggests that the old value system in relation to respect for the aged still remains valid today, but a small proportion of the elderly still are of the opinion that they are not being respected by children today. This is mainly because of the reasons such as '*do not consult for any family decision as before; do not like to get any advice of important matters; do not frequently communicate; and most importantly children completely ignore them now*'. The latter consist of 47.6 percent of the elderly parents who are of the opinion that their children do not respect them. However, it was found that the elderly are of the opinion that during their period, their parents and grandparents were more respected by the family members in comparison to the present situation.

Theoretically, old age support is positively associated with high fertility (Hugo 1997; Caldwell 1982). However, one can reasonably hypothesise that even in low-fertility situations, old-age support deriving from children can still be strong in the absence of any other assistance coming from the government or relatives/neighbours. This is mainly because those categories are highly burdened with financial constraints by being developing societies like Sri Lanka. In this context, it is important to examine whether this old-age respect will continue into the future by examining whether the parents today (i.e. adult children generation) expect old-age support from their children in the future. The survey found that 53.5 percent of the adult children do not expect old-age security from their children in the future but most strikingly, a large proportion (46.5 percent) still do. This suggests that the breakdown of the extended kin networks in the

modern society today and which will continue further in the future, will make the elderly less dependent to a greater extent on their children for security. This is still possible because of the availability of a larger proportion of adult children at present because of the high fertility that existed in the past. Although Sri Lanka's fertility has declined to near replacement level, the old-age support ratio in 2012 was still 4 adult children (20-59 years of age) to one old person (60+ years). In other words, theoretically, one elderly person in Sri Lanka still has 4 adult children to support him/her.

## **7.6 Conclusion**

This chapter examined the transition of the wealth transfers between parents and children from traditional to modern society in Sri Lanka. In this regard, Caldwell's proposition provided a basis to examine changes in the mode of production and values system related to old age support as the primary determinants of such change. This study, found that there has been a transition in the wealth transfers over the years from its traditional standing to present modern status in Sri Lanka, because of the changing mode of production. It is apparent from this analysis that parents in the modern family setting direct more wealth towards their children until their children become economically independent with appropriate employment. Therefore, the wealth transfers from parents to children during their life course are more than what was observed during the traditional family setting where wealth transfers were upwards towards parents from children. It was found that respect for aged people has not changed over the years, and that a large proportion of parents still expect their children's support in old age. This suggests that parents still tend to depend on their children to some extent in their old age although the family system has changed over the years. The next chapter will examine the components of the wealth flow between elderly parents and their adult children by determining their direction and levels in order to find whether the changing role of the family has made any significant impact on the well-being of the elderly.

## CHAPTER 8

### EXPLORING THE PATTERN OF INTERGENERATIONAL WEALTH TRANSFERS

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#### 8.1 Introduction

This chapter explores the patterns of intergenerational wealth transfers in Sri Lanka between the elderly parent generation and their adult children generation. In the previous chapter it was shown that when the role of the family changes from traditional to non-traditional, intergenerational transfers also tend to be transformed. This study hypothesised that aspects of intergenerational transfers between elderly parents and adult children, function as intermediate variables between the changing role of the family and the well-being of the aged. In other words, the changing direction and level of intergenerational transfers influence the well-being of the elderly.

This chapter is based on the elderly field survey and examines the levels, types and the direction of wealth transfers between elderly parents and their children. This is important because the general assumption is that elderly parents are supported by their adult children in many Asian cultures, as an accepted norm of the society (Lin and Yi 2011; Lowenstein and Daatland 2006; Silverstein *et al.* 2006). Elderly people often need support and it is expected that children are available, able and willing to provide assistance. Hence, ageing is a challenge to family, community and the country (United Nations 2013; Raikhola and Kuroki 2009; Anwar 1997; Knodel and Chayovan 1997; Hermalin *et al.* 1996; Chen *et al.* 1989; Martin 1989; Nugent 1985). However, studies on ageing in Asia have shown that the elderly are often the central pillars of multi-generational families (Pfau and Giang 2009; Schroder-Butterfill 2003; Kreager 2001; Knodel and Saengtienchai 1999; Hermalin *et al.* 1998; Natividad and Cruz 1997; Andrews and Hennink 1992). These studies emphasise the role of elderly people as providers of support to their families and communities.

Literature has consistently discussed how parent-child relationships change when parents become aged in contemporary societies, and what factors still remain strong in order to maintain such relationships. Mancini and Blieszner (1989, p. 276) point out that the position of parents changes according to their age, the number of children they

have and the ages of their children. Mancini and Blieszner (1989, p. 276) further claim that,

“there is social and legal consensus concerning the roles of parent and child; parents are to provide affection, physical sustenance, socialisation, and recreation; children are to respect and obey their parents, do well in school, and attain social skills”.

However, it appears that there is no such precise relationship when parents become older and children turn into adults. By examining elderly American society, Puner (1974) claimed that emotional and supportive functions of the family are still vital elements. Sussman and Burchinal (1962) proposed that parents become more involved with their families as they age, rather than with non-kin or other types of activities. They further show that the family's extended kin network is an important link between elderly parents and adult children. Some researchers claim that relationships between the elderly and their children are not necessarily dependent on geographical proximity but most often are linked to communication between parents and children (Jones 2012; Lei *et al.* 2011; Shanas 1968; Britton *et al.* 1961).

It has been also pointed out that the effects of government debt, social insurance, and public transfer programs depend on the magnitude and nature of private (family) transfers (Mokomane 2013; Köhler 2009; Gale 1998). In addition, intergenerational relationships can affect saving behaviour and consumption patterns. Therefore, it is necessary to explore the nature of dependence of elderly people in Sri Lanka; the kinds of support they share with their adult children and whether the changing role of the family has made any impact on such behaviour. The empirical evidence of this study is expected to contribute to the knowledge on the intergenerational wealth transfers.

## **8.2 Measuring Intergenerational Wealth Transfers**

There is no standard approach or methodology to measure intergenerational wealth transfers, but there is literature that helped in devising an appropriate methodology for Sri Lanka to explore the direction and level of the intergenerational transfers as shown in Table 8.1. It shows the various types of methods utilised for measuring wealth transfers and summarises these measures used by researchers who investigate intergenerational transfers.



**Table 8.1: Various Types of Methods Utilised for Measuring Wealth Transfers**

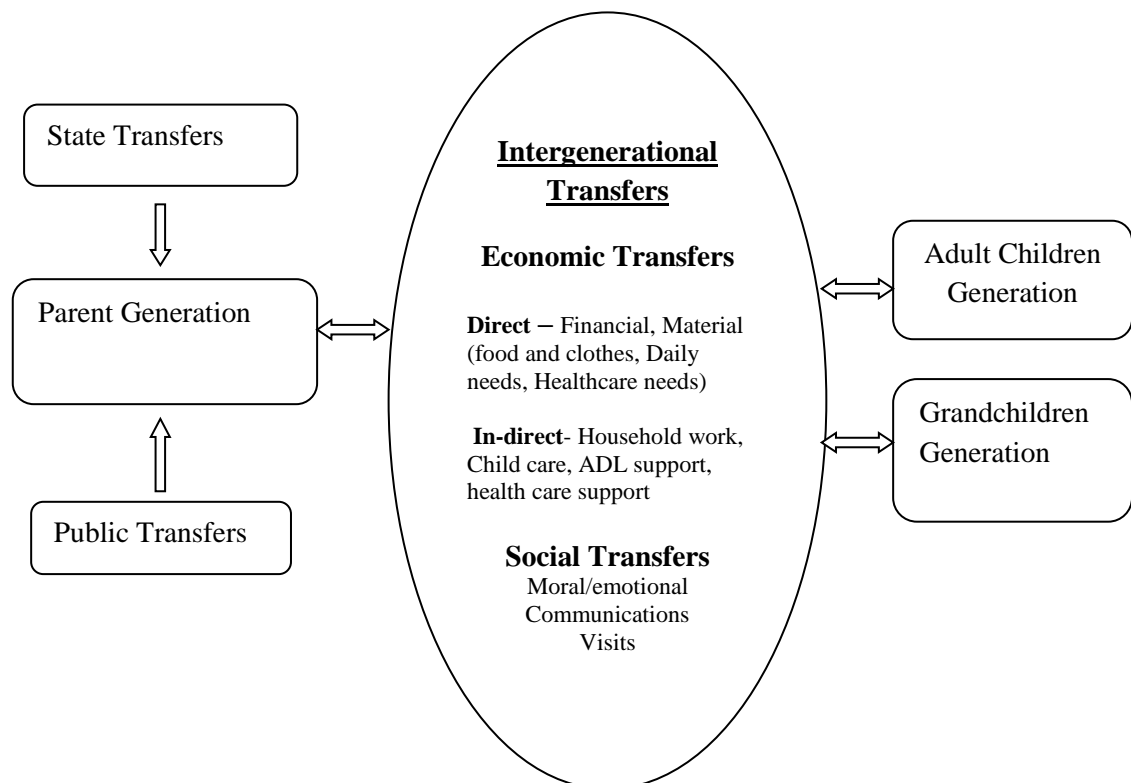
<b>Author</b>	<b>Measures of Wealth Transfers</b>
Hamaaki <i>et al.</i> 2014	<ul style="list-style-type: none"> <li>financial strength in terms of household's life cycle wealth</li> </ul>
Aziz and Yusoof 2012	<ul style="list-style-type: none"> <li>family and kinship network as major social support.</li> </ul>
Wiktor 2010	<ul style="list-style-type: none"> <li>money transfer from one generation to another</li> </ul>
Katz 2009	<ul style="list-style-type: none"> <li>personal and family resources and well-being of the elderly</li> <li>physical functioning and financial adequacy</li> </ul>
Yi and Lin 2009	<ul style="list-style-type: none"> <li>financial and physical support, as well as emotional closeness between the generations.</li> </ul>
Knodel and Chayovan 2008	<ul style="list-style-type: none"> <li>material support and social contacts</li> </ul>
Lloyd 2008	<ul style="list-style-type: none"> <li>transmission and exchange of human capital within society</li> <li>transmission of values, moral codes and social norms; the reproduction and transmission of culture, history and identity</li> <li>transmission and exchanges of knowledge and values between generations</li> </ul>
World Bank 2008	<ul style="list-style-type: none"> <li>informal support systems, intergenerational transfers in kind</li> </ul>
Benhabib and Bisin 2007	<ul style="list-style-type: none"> <li>money and inheritance</li> </ul>
Schroder-Butterfill 2003	<ul style="list-style-type: none"> <li>material and practical support to their families</li> </ul>
Charles and Hurst 2002	<ul style="list-style-type: none"> <li>lifetime income and ownership of particular assets</li> </ul>
Bhat and Dhruvarajan 2001	<ul style="list-style-type: none"> <li>social and economic pressures</li> <li>traditional sense of duty and obligation of the younger generation towards their older generation</li> </ul>
Hugo 1997	<ul style="list-style-type: none"> <li>family support and non-familial support</li> </ul>
Gale and Scholz 1994	<ul style="list-style-type: none"> <li>intended transfers ( gifts to other households) and unintended transfers (bequests).</li> </ul>
Caldwell 1982	<ul style="list-style-type: none"> <li>all the money, goods, services, and guarantees that one person provides to another</li> </ul>
Harbury and Hitchens 2012( first published in1979)	<ul style="list-style-type: none"> <li>inheritance of property</li> </ul>

Source: Hamaaki, Hori and Murata 2014; Aziz and Yusooff 2012; Harbury and Hitchens 2012; Wiktor 2010; Katz 2009; Yi and Lin 2009; Knodel and Chayovan 2008; Lloyd 2008; World Bank 2008; Benhabib and Bisin 2007; Schroder-Butterfill 2003; Charles and Hurst 2002; Bhat and Dhruvarajan 2001; Hugo 1997; Gale and Scholz 1994; Caldwell 1982.

It can be seen from Table 8.1 that some have included both familial and non-familial support to the intergenerational transfers (Hugo 1997), and others have added socio-

economic pressures outside the family (Bhat and Dhruvarajan 2001), as well as family and kinship support (Aziz and Yusooff 2012; Wiktor 2010; Lloyd 2008). Most of the others consider that intergenerational transfers should include both money and non-monetary transfers and can be broadly categorised into financial, material and social transfers (Harbury and Hitchins 2012; Yi and Lin 2009; Benhabib and Bisin 2007; Schroder-Butterfill 2003; Charles and Hurst 2002; Caldwell 1982). Two types of wealth can be distinguished namely, economic and social, and hence, this analysis focuses on the transfer of these between the elderly and the adult children generation. Economic transfers are further divided into direct and indirect transfers. Direct economic transfers include finance and material (food and clothes, daily needs and healthcare needs), while the indirect transfers consist of household work, childcare, ADL support and health care support. Social transfers are emotional/moral support, communication, visits and affection between generations. The main types of intergenerational transfers are presented in Figure 8.1.

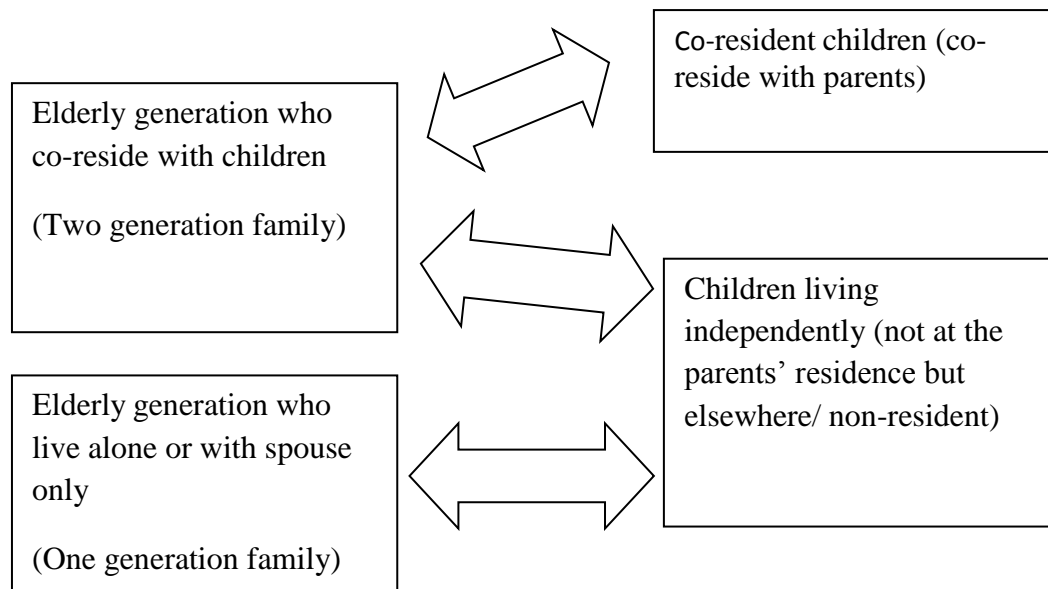
**Figure 8.1: Types of Wealth Transfers**



The elderly generation includes those who live alone or with spouse, which can be regarded as one generation families. In contrast, the elderly who co-reside with children as two generation families and those who co-reside with children together with

grandchildren as three generation families. However, in this study the analysis is mainly centred around one generation and the two or more generation families because the living arrangement status has been grouped into those who live alone or with spouse and those who live with children or with children and grandchildren. The adult children generation consists of two categories: children who co-reside with elderly parents and children who live independently (not at the parents' residence but elsewhere). When intergenerational transfers were observed, three types of combinations were found between the elderly generation and the adult children generation as shown in Figure 8.2. It is understandable that the elderly who co-reside with their children also have relations with those children who live elsewhere (non- resident), while the elderly who live alone or with a spouse only have a relationship with non-resident children.

**Figure 8.2: Intergenerational Relationships/transfers between Generations**



### 8.3 Intergenerational Wealth Transfers

The family can be regarded as one of the major institutions within which financial and non-financial support is exchanged. Some research on family support has explained the types, characteristics, and directions of flows between generations (Katz 2009; Kreager and Schröder-Butterfill 2008; Schroder-Butterfill 2003; Caldwell 1982). In developed societies, where families are smaller and extra-familial support exists, the co-residence of elderly parents with children is less prevalent (Mason *et al.* 2006; Spitze and Logan

1992). In such a situation, the proportion of elderly involved in transfers tends to be very low (Hogan *et al.* 1993). In contrast, in developing societies, families are larger and social support systems are basically non-existent (Kinsella and Gist 1995). Therefore, co-residence of the elderly with their adult children is a common feature but sometimes adult children live in close proximity to their elderly parents in order to exchange support (Zimmer and Korinek 2008; Knodel *et al.* 1992; Hermalin *et al.* 1990).

Research on interrelationships/transfers between elderly parents and their adult children has generally focused upon the links between the aged and their kin including the contribution of family towards the mental health and general welfare of the elderly, the changing age structure of the society, as well as the nature of changing family patterns (Kreager and Schröder-Butterfill 2008; Mancini and Blieszner 1989, p. 275) . However, within families, intergenerational relations often determine the willingness, and even the ability, of families to provide care and support for their older members and these relations also affect the intergenerational transfer of wealth (Kinsella and Phillips 2005, p. 27). Studies on family relations have explored the relationships between elderly parents and adult children by examining the frequency of visits and phone calls, geographic distance between generations, as well as the affection between the generations (Aziz and Yusooff 2012; Lawton *et al.* 1994, p. 57). The factors influencing the intergenerational relationships are multi-dimensional (Lavee *et al.* 2005; DeWit *et al.* 1988). Each dimension of the family relationship is interconnected with the others in ways that affect the well-being of both generations. In Asia, reciprocal duties between generations is often viewed as a mutual obligation as filial piety and in a more extreme form, ancestor worship (Lin and Yi 2011; Kinsella and Phillips 2005, p. 27). Moreover, increased geographic distance separating the generations can increase social distance between generations which can hinder the exchange of social and instrumental support (Lawton *et al.* 1994, p. 57).

Literature on families during their later stages of the life cycle also suggests that ageing parents and their adult children characteristically stay very much involved with one another (Umberson 1992, p. 664). It has been observed that most elderly parents wish to live near their children's residence and most parents uphold customary and regular contact with adult children (Aziz and Yusooff 2012; Ben-Ari and Lavee 2005; Rossi

1990). Therefore, it appears that the social forces that affect one dimension of the family relationships will indirectly impact on the others.

Ageing in Sri Lanka is occurring at an exceedingly rapid pace and the rate of growth of the older population will exceed that of the total population in the future. This phenomenon has made a significant impact on the structure of the family. Life expectancy of women at older ages has significantly increased compared to men at those ages and hence women now live longer than men. This has led to an increase in elderly widowed women in the Sri Lankan family. The literature suggests that the modernisation process, development and migration have also made considerable impact on the size, function and structure of the family unit, which have subsequently influenced intergenerational relationships and communication (Aziz and Yusooff 2012, p. 184). Hugo (1997, p. 113) explains that,

“it could be anticipated that, as the fertility transition proceeds, flow of wealth, commitment, and loyalty are strengthened from parents to children and laterally between partners and the upward flows to parents may be reduced”.

Sri Lanka has moved away from its traditional extended family structure to the modern nuclear family type during the onset of the fertility transition, and it is important to adopt Hugo’s proposition in the Sri Lankan context.

### **8.3.1 Economic Transfers**

Economic transfers from children can enhance the living standards of elderly parents (Albertini and Radl 2012, p. 118), and can be divided into direct and indirect economic transfers. Direct economic transfers are financial transactions, and the indirect economic transfers are those which do not have a direct financial flow but do have an economic value. Direct economic transfers are financial, food and clothing, daily needs and health care needs, while the indirect economic transfers are household work, child care, support for ADL and health care.

#### **8.3.1.1. Direct Economic Transfers**

Direct economic transfers were analysed to understand the current economic transfers between generations. It is clear from Table 8.2 that the majority of the elderly currently receive more support from their adult children than they provide to their children.

Moreover the adult children supported more healthcare needs, food, clothing and daily needs compared to other financial support. Similarly, adult children also currently receive a considerable amount of support from their elderly parents. Although more support is available for food and clothes and daily needs, a considerable proportion of the elderly still provide financial support to their adult children.

**Table 8.2: Economic Transfers between Elderly Parents and Adult Children**

<b>Transfer Type</b>	<b>Elderly parents giving( Adult children receiving) ( percent)</b>	<b>Elderly parents receiving (adult children giving) (percent)</b>
Financial	47.7 (109)	60.3 (163)
Food and Clothes	60.5 (118)	75.2 (198)
Daily Needs	65.1 (120)	72.7 (187)
Health Care Needs	46.6 (96)	81.0 (235)

Source: Elderly survey 2012

The discussion with elderly during the field study revealed that ‘they still help children who are in poor economic situations’. The in-depth studies further revealed that elderly who live alone ‘support their children with various items such as food, clothes, and some daily needs but not regularly’. Therefore, it is difficult to measure the value of those items by referring to a particular period of time. However, ‘parents were very worried about their economically unstable children and would try to support them financially whenever they could’. This study shows that elderly are not just merely recipients of support but a substantial number are involved in giving supporting their adult children as well. However, it is also important to note that a significant proportion of elderly do not receive any financial, material and health care support. This can happen because the younger generation also experience financial crises due to scarcity of resources. Therefore, they are not able to extend physical, economic and emotional support to the older generation since their priority is to provide support to the immediate family such as their spouse and children (Verma and Satyanarayana 2013).

In order to obtain a better understanding of the determinants of intergenerational transfers, age, sex, marital status and number of children alive at present, were adopted as important demographic characteristics, while place of residence (urban and rural), educational level, current employment, income and savings, were used as important socio-economic characteristics of the elderly population. Table 8.3 shows that elderly

are not just merely recipients of support irrespective of their living arrangements and various demographic and socio-economic characteristics. The age of the elderly does not show any significant difference between living arrangements but it is seen that exchanges are negatively associated with age. This may be due to the fact that Sri Lanka still consists of more young-old population at the elderly ages. At the same time, it was evident that those who are above the age of 70, and co-residing with children receive more compared to those who live in one generation families. It is also apparent from Table 8.3 that elderly women receive more support compared to men as a result of the presence of more widowed women at oldest ages. Similarly, those who were married appeared to provide more support compared to other categories of women. It is interesting that the presence of a higher number of children enables a larger proportion of elderly to co-reside with children compared to those who live in one generation families. Those who live in one generation families in the rural sector appeared to be in a more disadvantaged position in terms of exchanges compared to their urban counterparts, but the opposite is apparent for those who co-reside with children. In general, urban elderly receive more support from children while rural elderly provide more support to their adult children. The education level of the elderly do not show any significant relationship across all living arrangements. The economic standing of the elderly was established by their current employment status, income and saving status, but it can be assumed that many exaggerate their low economic status in order to obtain government assistance. Although the survey data also show that the unemployed have less income and savings but their exchange appeared to be substantial in both living arrangements. However, the findings also revealed that those who live in one generation families receive more financial support than elders those who co-reside with their children. Most importantly survey indicated that 44.5 percent of co-residing parents had children who were financially still dependent on them. This is because some parents reached old ages before their children were independent (Kreager and Schröder-Butterfill 2008). Moreover, the in-depth interviews revealed that elderly parents said that some unmarried children were unable to fulfil their necessary financial requirements hence parents still provide financial support to them.

**Table 8.3: Elderly Exchanging Financial Transfers (Current) with Children According to Demographic and Socio-economic Characteristics**

Explanatory variable	Living alone or with spouse only (One generation family)		Co-residing with children (Two or more generation family)	
	Giving (N=57) (percent)	Receiving (N=82) (percent)	Giving (N=43) (percent)	Receiving (N=49) (percent)
<b>Demographic</b>				
<b>Age</b>				
60-69	37.1	44.4	48.5	33.3
70-79	40.0	27.8	36.4	46.2
80+	22.9	27.8	15.2	20.5
<b>Sex</b>				
Male	45.7	38.9	45.5	38.5
Female	54.3	61.1	54.5	61.5
<b>Marital Status</b>				
Never-married	0.0	0.0	0.0	0.0
Married	54.3	46.3	51.5	46.2
Divorced	0.0	0.0	3.0	0.0
Widowed	45.7	53.7	45.5	53.8
<b>Number of Children Alive</b>				
1-2	37.1	25.9	30.3	23.1
3-4	31.4	37.0	45.5	43.6
5+	31.4	37.0	24.2	33.3
<b>Socio-economic Variables</b>				
<b>Place of Residence</b>				
Rural	62.9	31.5	39.4	51.3
Urban	37.1	68.5	60.6	48.7
<b>Education</b>				
No Schooling	8.6	9.3	9.1	10.3
Primary Education	22.9	25.9	24.2	33.3
Secondary Education	31.4	33.3	36.4	43.6
GCE OL	22.9	18.5	21.2	12.8
GCE AL and Above	14.3	13.0	9.1	0.0
<b>Current Employment</b>				
Employed	8.6	9.3	12.1	23.1
Unemployed	91.4	90.7	87.9	76.9
<b>Income</b>				
Lt Rs. 5000	97.1	94.4	87.9	82.1
Rs. 5000 and above	2.9	5.6	12.1	17.9
<b>Savings</b>				
Having Savings	34.3	27.8	60.6	30.8
Not Having Savings	65.7	72.2	39.4	69.2
<b>Total</b>	<b>38.3</b>	<b>54.5</b>	<b>28.7</b>	<b>32.8</b>

Source: Elderly survey 2012; Note: reference period is 3 months prior to the survey data

Material transfers are also a significant type of intergenerational support between elderly and adult children generations. According to Caldwell's synthesis, older parents



tend to depend on the support extended by their adult children (Caldwell 1982). However, it is also an accepted norm in most of developing countries (Singh and Tripathi 2014). Butterfill and Kreager 2008, p. 1787 states,

“...while differences of opinion continue to surround strategies of measurement, there is little disagreement on one aspect: children are commonly viewed as important potential sources of social insurance in old age in most of Asia, Africa and Latin America. Of course, elderly informants’ accounts for their situation require careful interpretation; they may be less reflection of actual material transfers than normative statements designed to secure family and individual reputation”.

It shows that actual material transfers may be reflected less in the survey due to under reporting the material support provide from adult children to elderly parents.

When material exchanges (food and clothes, daily needs, and healthcare needs) are considered, it was found that those who live in one generation families are in a more disadvantaged position as depicted in Table 8.4. Since the majority of the elderly are in the young-old groups, they still can extend their support to their adult children. At the same time, most of the adult children of those young elderly are still not financially stable and hence, they are not in a position to support their elderly parents. Elderly widowed women appear to exchange more material support compared to their male counterparts, while those who co-reside with children receive more support compared to those who live in one generation families. Generally, those who live in one generation families have less children compared to the co-residing parents which is reflected in the exchanges. Moreover, it appears that rural elderly are more involved in exchanges than their urban counterparts. Educational differentials do not show any significant relationship with material exchanges by different living arrangements. Since the majority are unemployed, with low incomes and less savings, their exchanges may not be determined by their economic status alone. The survey showed that age, gender, marital status, the number of children alive and place of residence are the major determinants of economic transfers.

**Table 8.4: Elderly Exchanging At Least One Material Transfers (Current) with Children according to Demographic and Socio-economic Characteristics**

Explanatory variable	Living alone or with spouse only (One generation family)		Co-residing with children ( Two or more generation family)	
	Giving N=58 ( percent)	Receiving N=77 (percent)	Giving N=90 (percent)	Receiving (N=121) (percent)
<b>Demographic</b>				
<b>Age</b>				
60-69	34.4	32.6	56.6	43.1
70-79	43.8	39.1	32.1	31.9
80+	21.9	28.3	11.3	25.0
<b>Sex</b>				
Male	46.9	41.3	49.1	34.7
Female	53.1	58.7	50.9	65.3
<b>Marital Status</b>				
Never-married	0.0	0.0	0.0	0.0
Married	56.2	47.8	66.0	41.7
Divorced	0.0	0.0 (0)	1.9	1.4
Widowed	43.8	52.2	32.1	56.9
<b>Number of Children Alive</b>				
0	0.0	2.2	0.0	0.0
1-2	37.5	37.0	32.1	27.8
3-4	34.4	26.1	47.2	37.5
5+	28.1	34.8	20.8	34.7
<b>Socio-economic Variables</b>				
<b>Place of Residence</b>				
Rural	68.8	58.7	58.5	61.1
Urban	31.3	41.3	41.5	38.9
<b>Education</b>				
No Schooling	9.4	10.9	5.7	9.7
Primary Education	31.3	26.1	22.6	31.9
Secondary Education	31.3	34.8	35.8	44.4
GCE OL	15.6	19.6	24.5	9.7
GCE AL and Above	12.5	8.7	11.3	4.2
<b>Current Employment</b>				
Employed	9.4	8.7	30.2	20.8
Unemployed	90.6	91.3	69.8	79.2
<b>Income</b>				
Lt Rs. 5000	93.8	91.1	73.6	81.9
Rs. 5000 and above	6.2	8.9	26.4	18.1
<b>Savings</b>				
Having Savings	31.3	23.9	66.0	36.1
Not Having Savings	68.8	76.1	34.0	63.9

Source: Elderly survey 2012

Some parents co-reside with adult children but also have children who live independently elsewhere. It was found that 70 percent of co-residing elders had adult children living elsewhere, and 52 percent of these adult children take care of the economic necessities of their elderly parents. It was found that a higher percentage of elders who co-reside with children also get support from their children living separately. Jones (2012, p. 96) states,

“Co-residence is not the only indicator of close caring relationships. Assistance can notionally be divided into three categories: financial assistance, emotional support and physical support. The first two of these do not require co-residence, particularly in the age of the cell-phone”.

This aspect was clearly observed during the field study as shown in the following case study, which shows that elderly will allow adult children to co-reside until they are financially stable, but do expect financially better off children (living elsewhere) to help them in their old age.

Karunawathi is a 74 year old widow who co-resides with her recently married youngest son. She also has a daughter living in the same village, but the eldest son lives in Colombo. All of her children are married. She helps her youngest son's family since they are still not financially stable. She says, ‘my other children were also with me until they built their own houses and now they are financially well off; so my eldest son can now help me financially’. I help my daughter who is living in the same village and she also helps me whenever I need help in various activities. My elder children do not expect their younger brother to bother about my expenses. I hope the youngest son will also look after me when I am unable to work in my senior years, but I pray every day to end my life without troubling my children (Case 11, Respondent 31).

In-depth findings revealed that those children living in close proximity in better economic situations help their elderly parents. It is also important to note that a higher percentage of co-residing parents receive support from all their children irrespective of their living arrangements. It was found that 42.4 percent of the co-residing parents provided financial help to their adult children who lived elsewhere. This further suggests that co-residing parents may be economically better off than those who live in one generation families. The in-depth field work also showed that although elderly parents co-reside with children, they have some unmarried children who have migrated for education or employment. In addition, elderly parents still help some adult children who are living elsewhere.

The in-depth studies revealed that parents cannot ignore children when they are in dire need of finances or any other items, although children are living independently in separate households. It is a Sri Lankan custom to provide material support to whoever resides with you (World Bank 2008). Therefore, it is not surprising to observe that a higher percentage of co-residing parents are receiving material support from their children. It is also a custom for adult children who live independently to take food, clothes and other material goods that may be needed when they visit their elderly parents rather than purely providing financial support. It was shown in an earlier study on ageing in Sri Lanka, that the material support from adult children to elderly parents is upward at a relatively high level in Sri Lanka (World Bank 2008). It was also found through in-depth studies, that most of the adult children said that they give a lot of in-kind support, especially food and clothes to their elderly parents when they visit each other. In addition, when parents visit their adult children they take gifts for their grandchildren as well. Furthermore, when adult children need help, elderly parents visit their childrens' house and help them in various household related activities and sometimes they stay with them for a few days, weeks etc.

The following case studies further reveal that most of the elderly parents still support their unmarried children, as well as those who are in financial difficulties. Elderly parents help all their children whenever possible and they expect their married children to help unmarried sisters but it is often difficult when they themselves have financial difficulties. Therefore, the elderly often engage in employment while also taking care of grandchildren. In addition, elderly parents still look after the needs of the unmarried daughters until they find suitable partners.

He is Jinasena, a 71 years old man living with his wife and children. They have three children. The eldest and youngest children are daughters and the middle child is a son. The elder daughter got married and migrated to another district. The son is also married and living with them in their house, while one daughter is still unmarried. Therefore, they still have to look after her needs until she is financially stable. She is still waiting for a permanent job by delaying her marriage. Three of their children have passed the advanced level examination. The son and his wife have permanent jobs and they have one daughter (granddaughter of Jinasena). Jinasena is running a small grocery shop to meet their daily expenses. Although they had savings, they have spent a lot of money on their childrens' education and marriages. They expect that their daughter will get a good job and the other two children will support their younger sister's marriage and other expenses. However, they are not in a position to help their parents and unmarried sister as they expected due to high living costs.

Therefore, Jinasena and his wife still need to take care of the needs of their unmarried daughter while supporting other children. They prefer to live with their son because they expect that the house will be owned by him after their death. Moreover, he said that ‘when we are living with our children we can still take care of their needs and we also feel comfortable in our older age’(Case 12 ,Respondent 135)

It seems there is a complexity of the exchanges between generation depending on whether it is one generation or multi-generational families. Butterfill and Kreager, 2008, p. 1791 states that,

“older women sometimes have responsibility for childcare and domestic tasks in exchange for material support from the younger generation, and multi-generational living arrangements are often characterised by the different generations contributing resources and labour more or less equally”.

The case studies here show that the elderly who co-reside, often have adult children as well as dependent children. The following case study shows that one child is married and the other is looking for employment while studying. Therefore, the parents still need to look after his necessities until he finds gainful employment. In addition, they also help their eldest son’s family by taking care of household chores and looking after grandchildren when their son and daughter-in-law are at work. It also clearly shows that parents exchange support with their eldest son. However, they are still happy to co-reside with children since they can exchange various support.

She is Rekha, living with her husband and children in their home. She is 64 years old. They have two children and both are sons. The elder son has got married and is living with them, but the younger son is still single. Both sons have studied up to Advanced Level examination. The elder son is working in the armed forces and younger son is still waiting for a permanent job, while taking an English course and a computer course during the interim waiting period. Rekha is doing household work since the daughter-in-law is working in a private company. Since the eldest son has two children, Rekha has to take care of her grandchildren too. Although their eldest son and wife are both working, still their monthly income is not sufficient for their monthly expenses as they spend a lot of money on their children’s education. Therefore, her husband still works in a security firm to manage their expenses. Further they have to take care of their younger sons needs as well. They are content to live with their eldest son because although they cannot financially support them, they but all the household necessities. Therefore, they can manage their expenses since they get material support, as well as moral support, from their married child (Case 13, respondent 146).

When examining current economic transfers the type of transfers exchanged between grandparents and adult grandchildren should be considered because they can affect the well-being of the aged. This support is of special significance in modern society because more living grandparents than ever due to increased longevity (Xu and Chi 2011 p. 149). It was found that 27 percent of elders in the sample had adult grandchild/ren. Several generations were often living at the same time because of the increased life expectancy of the Sri Lankan population. This has led elderly parents who are above 60 years of age to have a significant number of adult grandchildren. This provides a great opportunity for elderly to receive some support from their grandchildren. Studies indicate that grandchildren are potential sources of assistance for their grandparents such as help in daily living, financial support and emotional support (Xu and Chi 2011; Bengtson 2001; Harwood and Lin 2000; Ashton 1996; Xu and Chi 2011).

This analysis suggests that the majority of grandchildren tend to provide healthcare needs (29.5 percent) to their grandparents, compared to other economic needs (food and clothes, 18.7 percent; daily needs, 18.7 percent; financial, 12.9 percent). Although grandchildren's monetary contribution is relatively small (since they are in the early stage of the life transition), it was found that about 22 percent of grandparents provide economic support to their adult grandchildren. The following case study is a good example in this regard where exchanges exist between grandparents and adult grandchildren.

Sumanawathi is a 71 years old widow with three grandchildren. She said, 'I am proud of having adult grandchildren and have one great grandchild too. All three grandchildren help me. They give money and many gifts and visit me when I get sick. I am fortunate because I get support from my children and grandchildren, but I support my grandchildren financially when I get my monthly pension. I receive money from my children occasionally as well. I also help the unmarried adult grandchild for her studies as much as I can. I am happy about their support in my old age since I have put my full effort into looking after them when they were small kids (Case 14, respondent 162).

Traditionally elderly are being regarded as the receivers of the support from their adult children but this study shows that a substantial number of elderly are currently supporting their adult children, as well as adult grandchildren in some instances. This section considered only the direct economic transfers but cannot be ignored the indirect

economic transfers between the elderly parents and adult children. The next section is devoted to discuss the in-direct economic transfers.

#### **8.3.1.2 Indirect Economic Transfers**

Although there is no direct financial value for some activities they can be considered as having implicit economic value. Both elderly parents and adult children carryout several activities at home which can be measured in terms of its monetary value if they are performed by other hired people who are paid. They include various types of household work attended by elderly parents, as well as ADL and health care support, provided to the elderly parents by adult children. The types of household work undertaken by elderly includes, cooking, cleaning and washing etc., while the ADL and healthcare support provided to the elderly may include transport provisions, social activities and taking care of all types of support of the elderly such as feeding, bathing, dressing, toileting and transferring(walking).

#### ***Type of Household Activities performed by the Elderly***

Research on the role of the elderly in Asia has tended to focus on their indirect contribution, that is, assistance with child care or housework which enables the younger generation to devote themselves to other productive or reproductive tasks (Schroder-Butterfill 2003; Hermalin *et al.* 1998; Chan and DaVanzo 1996; Andrews and Hennink 1992). It shows that elderly persons not only receive personal care from family members but they also provide such care to them (Knodel and Chayon 2011).

This study found that the majority of co-residing elderly parents are involved in cooking, cleaning and marketing which are very much part of essential daily household activities. Table 8.5, shows that the young-old group is more involved with household activities irrespective of their living arrangements. More elderly women, especially those who live in one generation families are involved in household activities compared to their male counterparts. Both married and widowed women outnumber the other categories in terms of their involvement in household activities in both living arrangements. Those who live in one generation families with no children or have fewer children are more involved in household activities, while those who co-reside with children do not show such a relationship. In general, there is no difference between

urban and rural aged respondents in terms of engagement in household activities because nearly half of them in both areas are involved in such activities. Educational levels also do not show any difference, while the unemployed with less income and savings tend to be more involved in household activities whether they reside with children or not.

**Table 8.5: Elderly Respondents According to Their Engagement in Current Household Activities by Demographic and Socio-economic Characteristics**

Explanatory variable	Living alone or with spouse only (One generation family) (percent)	Co-residing with children ( Two or more generation family) (percent)
<b>Demographic</b>		
<b>Age</b>		
60-69	48.5 (64)	56.0 (70)
70-79	36.4 (48)	31.2 (39)
80+	15.2 (20)	12.8 (16)
<b>Sex</b>		
Male	35.6 (47)	41.6 (52)
Female	64.4 (85)	58.4 (73)
<b>Marital status</b>		
Never-married	24.2 (32)	0.0 (0)
Married	39.4 (52)	56.0 (70)
Divorced	1.5 (2)	0.8 (1)
Widowed	34.8 (46)	43.2 (54)
<b>Number of children alive</b>		
0	32.6 (43)	0.8 (1)
1-2	25.0 (33)	28.0 (35)
3-4	22.7 (30)	43.2 (54)
5+	19.7 (26)	28.0 (35)
<b>Socio-economic variables</b>		
<b>Place of Residence</b>		
Rural	48.5 (64)	50.4 (63)
Urban	51.5 (68)	49.6 (62)
<b>Education</b>		
No Schooling	6.8 (9)	6.4(8)
Primary Education	22.7 (30)	26.4(33)
Secondary Education	31.1 (41)	40.0(50)
GCE OL	25.8 (34)	16.0(20)
GCE AL and Above	13.6 (18)	11.2(14)
<b>Current Employment</b>		
Employed	17.4 (23)	24.8 (31)
Unemployed	82.6 (109)	75.2 (94)
<b>Income</b>		
Lt Rs. 5000	87.9 (116)	80.0 (100)
Rs. 5000 and above	12.1 (16)	20.0 (25)
<b>Savings</b>		
Having Savings	42.7 (56)	52.8 (66)
Not Having Savings	56.7 (75)	47.2 (59)

Source: Elderly survey 2102



It is also seen that a higher proportion of elderly who live in one generation families are engaged in household activities compared to the elderly who co-reside with children because the latter category is obviously helped by their co-residing children. However, co-residing children with their elderly parents receive support in household activities, which can be regarded as essential since they can be involved in their employment activities without disruption. Further analysis showed that a larger proportion (36.4 percent) of co-residing parents were taking care of grandchildren as well. In contrast, however, about 11.4 percent of the elderly who live in one generation families also take care of grandchildren, possibly of those who live in close proximity or have children who have migrated. Generally, the researchers have found that grandparents provide care to grandchildren and help bringing up the grandchildren (Knodel and Chayovan 2012; Verma and Satayanarayana 2012). Most of those engaged in household activities were happy with the work that they performed irrespective of their living arrangements. However, 12.3 percent of those who live in one generation families were found to be unhappy about the household work they performed at home compared to only 6.1 percent of co-residing parents.

### ***Activities for Daily Living (ADL)***

Basic ADLs are self-care tasks which include bathing, dressing, eating/feeding, functional mobility, personal hygiene and grooming and toilet hygiene (Roley *et al.* 2008). Assistance with daily living can be considered as activities having an economic value if they are being undertaken by hired workers, such as domestic workers. Survey data, showed that 15.7 percent of the elderly need ADL support while 22.0 percent of the co-residing parents expect such support and only 9.3 percent of the elderly living alone needed ADL support. A low percentage of elderly needing ADL support was mainly due to the fact that the majority of the elderly are still in the young old ages and hence they are still healthy and active. Jones (2012, p. 96) claimed that the care demanded by the elderly should not be exaggerated since a great majority of them do not need care. Hence, especially those young-old can still support their children until they may require ADL support later in life.

ADL support for the elderly who live in one generation families are mainly given by their spouse, and most importantly by domestic aids, relatives and others as shown in

Table 8.6. In contrast, assistance for daily living for elderly who co-reside with children tend to be given by their sons or daughters and to some extent by domestic aids. This suggests that more attention is needed for elderly who live in one generation families especially, when they get older.

**Table 8.6: Elderly According to the Support Given by Various People for ADL by Living Arrangements**

<b>Person who gives ADL support</b>	<b>Living alone or with spouse only (One generation family) N= 14 (percent)</b>	<b>Co-residing with children ( Two or more generation family) N=33 (percent)</b>	<b>Total N=47 (percent)</b>
Son/daughter	14.3	60.6	46.8
Son-in-law/daughter-in-law	28.6	24.2	25.5
Spouse	14.3	0.0	4.3
Domestic aid	21.4	15.2	17.0
Other Relatives/neighbours	21.4	0.0	6.4
Total	100.0	100.0	100.0

Source: Elderly Survey 2012

When people get older and suffering from non-communicable diseases which need long term care and medication, there is a growing need of health care assistance. This study found that 44.6 percent of elderly who live in one generation families and 49.7 percent who co-reside with children have poor health. This study found that a higher proportion of elderly those who live in one generation families are less healthy compared to those who co-reside with children, except those who suffer from diabetes and blood pressure. The elderly suffer from these diseases for about 8 years on average and most importantly, 72 percent of those need regular treatments. Further analysis shows that there is a strong association between health status, age and gender of the elderly as depicted in Table 8.7. It is observed that women suffer more with blood pressure compared to men, and difficulties with body movement and joint pains are more common among men and seems increasing with age. In addition, more men are vulnerable to cancer than women at elderly ages. Although diabetes and heart disease do not show significant sex differentials at younger ages, it seems women are more vulnerable for those disease when age advances.

**Table 8.7: Elderly According to the Type of Illnesses by Age and Sex**

<b>Illness</b>	<b>Male (percent)</b>	<b>Female (percent)</b>
	<b>60-69</b>	
Diabetes	26.2	27.3
Heart disease	14.3	18.2
Blood pressure	31.0	49.1
Wheeze/short of breadth	19.0	10.9
Joint pains/difficulty in body movements	11.9	20.0
Fracture in limbs	2.4	1.8
Cancer	2.4	0
Other	26.2	25.5
	<b>70-79</b>	
Diabetes	16.7	17.6
Heart disease	20.8	19.6
Blood pressure	41.7	47.1
Wheeze/short of breadth	20.8	9.8
Joint pains/difficulty in body movements	41.7	27.5
mental disability/illness	4.2	2.0
Other	37.5	31.4
	<b>80 and over</b>	
Diabetes	0	8.8
Heart disease	0	8.8
Blood pressure	33.3	44.1
Wheeze/short of breadth	44.4	11.8
Joint pains/difficulty in body movements	44.4	29.4
Fracture in limbs	0	2.9
Cancer	11.1	2.9
Other	33.3	26.5

Source: Elderly survey 2012, Multiple responses, N= 215

When there is a higher proportion of elderly needing health treatment for their diseases, it is important to examine who assists them to obtain medical treatment. It was found that a high proportion of the children (64.7 percent) take co-residing elderly for health treatments, while 54.7 percent of those who live in one generation families tend to get themselves to treatment, although 30.7 percent of children still accompany them. Overall, it suggests that it is childrens' responsibility to take their elderly parents for medical treatment.

### 8.3.2 Social Transfers

Adult children are often regarded as a source of help and support for the elderly. However, the quality and frequency of social support that they receive is dependent on the quality of the relationship that exists between the elderly and their adult children (Aziz and Yusoooff 2012, p. 184). This is because adult children are one of the closest sources of social support for the elderly and this mutual support contributes to the life satisfaction of the elderly (Aziz and Yusoooff 2012; Verbrugge and Chan 2008; Kim and Kim 2003; Kim *et al.* 2000), and subsequently to their well-being and quality of life (Aziz and Yusoooff 2012). Social support can be categorised in terms of the types and frequency, quality and quantity, instrumental and emotional, as well as formal and informal (Alavi 2013; Aziz and Yusoooff 2012).

Although most of the studies report that such relationships are supportive, a few studies have found difficult relationships that subsequently become a source of psychological distress for both parents and children (Pillemer *et al.* 2006). It has been mentioned in previous chapters that the changing role of family, directly or indirectly, affects the quality and frequency of the intergenerational relationship. This section examines the social support in terms of moral/ emotional support, communication and visits between the generations. This means that if the relationship is detached and distant, it would be difficult for the aged to get support and assistance from their family members. In such a context, the elderly have to depend on other sources such as formal (government) or informal (friends, neighbours, etc.). Therefore, the social support extended between the aged and the children generations becomes very important in relation to the status of the well-being of the elderly.

### 8.3.2.1 Moral<sup>17</sup>/emotional support<sup>18</sup>

Intergenerational relationships are an important component for successful coping and social integration in old age (Silverstein and Bengtson 1991). Further, such relationships seem to contribute to the psychological well-being of each other throughout the life course (Silverstein *et al.* 2006; Rossi 1990). Social support can be examined from the perspective of moral/emotional support extended between generations. Measuring this support is difficult since moral satisfaction of the parents also depends on the different types of support they receive from their adult children. The in-depth interviews revealed that their moral satisfaction levels tend to improve when they receive more care from their children. The elderly in the sample said when they provided more support to their children, they also tended to receive more support in return. This suggests that those who obtain more support from parents are much more likely to reciprocate support to them. This means, the principle of reciprocity between generations is a key factor for adult children providing support to elderly parents (Aziz and Yusooff 2012).

Table 8.8 indicates that both elderly and their children share moral/emotional support with each other to a considerable extent. However, widowed women who are aged 80 and more and co-reside with children, receive more moral/emotional support from their children compared to those who live in one generation families. It is also discernible that rural elderly share more moral/emotional support with children compared to the urban elderly, particularly the co-residing elderly. The educational level of the parents do not show any significant relationship but the economic variables indicate those who are unemployed, and have low incomes and less savings, share more moral/emotional support than their more affluent counterparts. Overall, this study suggests that co-resident elderly are in a more advantageous position in relation to moral/emotional support exchanges with children.

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<sup>17</sup> Moral support- emotional or psychological backing as opposed to mental help( [dictionary.reference.com/browse/moral support](http://dictionary.reference.com/browse/moral%20support)).

<sup>18</sup> Emotional support defined as companion for conversation, listening, persuasion, compassion and a point for spiritual and religious solace( Alavi 2012).

**Table 8.8: Elderly Exchanging Moral/emotional Support with Children According to Demographic and Socio-economic Characteristics**

Explanatory variable	Living alone or with spouse only (One generation family)		Co-residing with children ( Two or more generation family)	
	Giving (N=58) (percent)	Receiving (N=42) (percent)	Giving (N=68) (percent)	Receiving (N=76) (percent)
<b>Demographic</b>				
<b>Age</b>				
60-69	45.2	39.3	50.0	41.7
70-79	41.9	46.4	38.5	35.0
80+	12.9	14.3	11.5	23.3
<b>Sex</b>				
Male	51.6	42.9	42.3	38.3
Female	48.4	57.1	57.7	61.7
<b>Marital Status</b>				
Never-married	0.0	0.0	0.0	0.0
Married	64.5	60.7	59.6	43.3
Divorced	0.0	0.0	0.0	0.0
Widowed	35.5	39.3	40.4	56.7
<b>Number of Children Alive</b>				
1-2	41.9	39.3	30.8	31.7
3-4	32.3	32.1	44.2	40.0
5+	25.8	28.6	25.0	28.3
<b>Socio-economic Variables</b>				
<b>Place of Residence</b>				
Rural	67.7	53.6	61.5	68.7
Urban	32.3	46.4	38.5	31.3
<b>Education</b>				
No Schooling	6.5	7.1	5.8	11.7
Primary Education	25.8	14.3	17.3	28.3
Secondary Education	25.8	25.0	48.1	40.0
GCE OL	25.8	28.6	19.2	11.7
GCE AL and Above	16.1	25.0	9.6	8.3
<b>Employment Status</b>				
Employed	12.9	7.1	23.1	15.0
Unemployed	87.1	92.9	76.9	85.0
<b>Income</b>				
Lt Rs. 5000	93.5	92.9	82.7	88.3
Rs. 5000 and above	6.5	7.1	17.3	11.7
<b>Savings</b>				
Having Savings	38.7	42.9	46.2	45.0
Not Having Savings	61.3	57.1	53.8	55.0
<b>Total</b>	<b>38.3</b>	<b>28.3</b>	<b>45.2</b>	<b>50.4</b>

Source: Elderly survey 2012

In-depth interviews showed that most of the elderly parents indicated that they feel they are being morally supported by children when they receive moral/emotional support from them. This moral/emotional support can be summarised as follows: giving gifts; frequency of visits and telephone calls; discussing family issues and getting parents advice; providing care during illness; inviting them for family entertainments; watching TV together; getting support for family decisions; help with household chores and getting advice for grandchildren related matters. Table 8.9 shows that elderly who live in one generation families have less moral/emotional support from their adult children. However, the in-depth studies found that living away from their children has made them receive less moral/emotional support from some of their adult children. Those elderly find that their childrens' busier lives with employment and their childrens' activities, severely affect the level of affection between parents and children. In addition, migration of the children, conflict between children and parents and children facing financial difficulties are some of the reasons the elderly mentioned as the major reasons for less social support from their adult children. However, those elderly living in one generation families tended to suffer most when the moral/emotional support was not coming from their children. Most of the elderly try to understand this situation and find an alternative solution, such as being involved more in social, religious and community activities and going on trips with non-family members.

It seems that those who co-reside with adult children receive more moral/emotional support than those who do not. Those elders co-residing with children also expect their childrens' recognition for their support by involving them in making important family decisions, take their advice for minding grandchildren, involve them in family activities, giving assistance for daily living and providing financial assistance. However, those who said they are not satisfied with the moral support they receive from their children claimed that they did not get them involved in any family matters instead expected them to provide support to their family still. They also said that sometimes the children blame them when some unexpected things happened in relation to child caring activities. This had created a very unpleasant environment for some of the elderly who co-reside with children. Therefore, the social support exchanges between parents and children are mainly dependent on the type of relationship (i.e solidarity or conflict relationship). Overall, the analysis demonstrates that the quality of moral support is determined by the adult children's perception of the value of the support for elderly

parents. Some co-residing elderly parents indicated that they received more social support from those children who live elsewhere because they communicate frequently and whenever they have issues they consult them in order to get some useful advice.

Moral support between elderly parents and adult children is two-way, and hence it is also important to examine moral support rendered by the elderly parents to adult children (Yi and Lin 2009). This study found that adult children who co-reside with elderly parents get more support since they are living in the same household and make regular contact with parents. Those adult children living separately, but living in close proximity, also receive more support from their parents than those who live in far away places. According to elderly parents, the following are the major ways they provide moral support to their adult children: relief from household work; advising to relieve their stress; eg. conflict with spouse, financial difficulties, or other household difficulties; minding grandchildren; support for their entertainment; caring for all the household needs; providing mental support for their job, higher studies, professional studies etc.; help in the education of their grandchildren; attend to all the household responsibilities. Therefore, some elderly parents morally support children since they expect them to have a better life. Therefore, the majority of the elderly said: *“I expect my children to have a happy life, so I help the way I can do”*; *“I do not care about my rest, but I care about my childrens’ happiness”*; *“I do not care how they support me, I am happy if they love me and are close to me, but I am trying my best to support them”*. These statements show that elderly parents are doing their best for their children by providing moral support.

It was found that 36.4 percent of elderly parents who co-reside with children and 11.4 percent of the elderly in one generation families are taking care of grandchildren. Therefore, elderly parents extend their social support to both adult children and grandchildren. Helping to manage their children’s household and minding the grandchildren appear to be the main moral support given to their adult children (Aziz and Yusoff 2012). Direct or indirect support flowing from elderly parents to adult children which contributes towards lessening the burden of the children generation, suggests that the role of the elderly as pillars of wisdom is still apparent (Aziz and Yusoff 2012; Schroder-Butterfill 2003). Liang and Bennett (2001) found that the elderly receiving support and at the same time being a provider, correlates with greater well-being and life satisfaction.



The in-depth survey found that elderly parents taking care of grandchildren appear to receive moral support in return. Most of the elderly indicated that when they love their grandchildren and take care of their needs, they feel morally satisfied because it is some relief for them in old age. Most importantly, it was found that a higher proportion of elderly parents who co-reside with adult children receive emotional support, and one of the reasons may be due to their involvement in taking care of grandchildren.

### 8.3.2.2 Non-family Social Support

Living without children do not always mean that their relationship with their children are strained (Aziz and Yusoff 2012). The majority of these aged tend to develop relationships with their friends or neighbours more than they do with children. It was found that family members tend to provide physical support while friends extend emotional support (Liu and Rook 2013). This study found that the majority of the elderly irrespective of their living arrangements receive more moral support from neighbours and other relatives as shown in Table 8.9. This support is more important for elders those who live alone in one generation families since it is one of the main source of moral support for them.

**Table: 8.9 Elderly According to the Moral Support Received from Non-family Members by Living Arrangements**

<b>Non-family support from</b>	<b>Elderly live alone or with spouse only(One generation families) N=69 (percent)</b>	<b>Elderly co-residing with children (Two or more generation families) N=58 (percent)</b>
Other relatives	30.4	56.9
Neighbours	79.7	62.1
Housemaid	1.4	1.7
NGO/charity	2.9	3.4
Other	1.4	3.4

Source: Elderly Survey 2012; multiple responses

In-depth findings of this study revealed that the elderly develop close relationships with non-family members to overcome loneliness. Relationships with neighbours and friends also provide them with an opportunity to share their problems and issues with each other. They tend to develop a strong relationship with friends and neighbours when their adult children are busy with their own problems related to employment and childrens' issues, and many have very limited time to attend to their parents' issues. It

was also found that those elderly who do not have children tend to have more close relationships with relatives and neighbours since they are the main providers of social support to them. Those who do not have any children tend to find several ways of overcoming their loneliness, such as meeting with friends, neighbours, performing religious activities and participating in community activities etc.

#### **8.4 Public Transfers**

The well-being of the elderly largely depends on the relative contribution made by both public and family transfers (United Nations 2013). Therefore, examination of the public transfer systems is needed to define many of the policy issues of ageing populations. In this study government and non-governmental organisations are examined. It was found that 52.7 percent of the elderly receive government assistance provided for the elderly, such as pensions, provident fund, *Samurdhi* assistance and *Pinpadi*. However, it should be noted that *pinpadi* and *samurdhi* have introduced only for poor people and do not get sufficient amount for their survival. It also suggests that nearly half of the elderly do not receive government assistance. Therefore, they have to either depend on their own income by engaging in some further employment or rely on the support of their adult children or others. It was observed that a substantial number of younger elderly are still employed. The majority of the elderly who co-reside with children (77.1 percent) receive a pension and provident fund from public sector employment in which they were employed before retirement. In contrast, the majority in one generation families (56.8 percent) seem to be relying on the government's poverty alleviation assistance (*Samurdhi and Pinpadi*). According to the Department of Census and Statistics (2013) 10.4 percent of the elderly population was poor in the 2009-2010 period. Therefore, this study suggests that the majority of them are among those who live by themselves because they depend on government income support for the poor as shown in Table 8.10.

**Table 8.10: Elderly According to the Type of Government Assistance Currently Receive by Living Arrangements**

<b>Government assistance</b>	<b>Living alone or with spouse only (One generation family) N=74 (percent)</b>	<b>Co-residing with children ( Two or more generation family) N=83 (percent)</b>
Pension	33.8	60.2
Provident Fund	9.5	16.9
<i>Samurdhi</i>	33.8	16.9
<i>Pinpadi</i>	23.0	4.8
Other	0.0	1.2

Source: Elderly survey 2012

Awareness of the facilities provided by the government is limited among the elderly population. Table 8.11 shows that only 20 percent of them are aware of programmes offered by the government. However, among them the majority are aware of the societies for the aged and elderly homes, while a significant proportion knows about programmes providing spectacles for the elderly, and others of programmes frequently organised by the government. However, awareness on farmers pension schemes, poverty alleviation scheme like Samurdhi and Pin padi are very limited among the elderly.

**Table 8.11: Elderly Respondents Aware of the Government Programmes for the Elderly (N=60)**

<b>Programmes</b>	<b>Percentage</b>
Pin padi	5.0
Samurdhi	3.3
Awareness programmes for elders	11.7
Providing spectacles	13.3
Provide wheel chairs	5.0
Farmers pension	1.7
Elder societies/Homes	50.0
Elder ID	6.7
Other	3.3
Total	100.0

Source: Elderly survey 2012

The elderly survey further showed that about 90 percent of elderly parents irrespective of their living arrangements are of the opinion that government services for the elderly are not adequate. Although there are various suggestions made by the elderly to

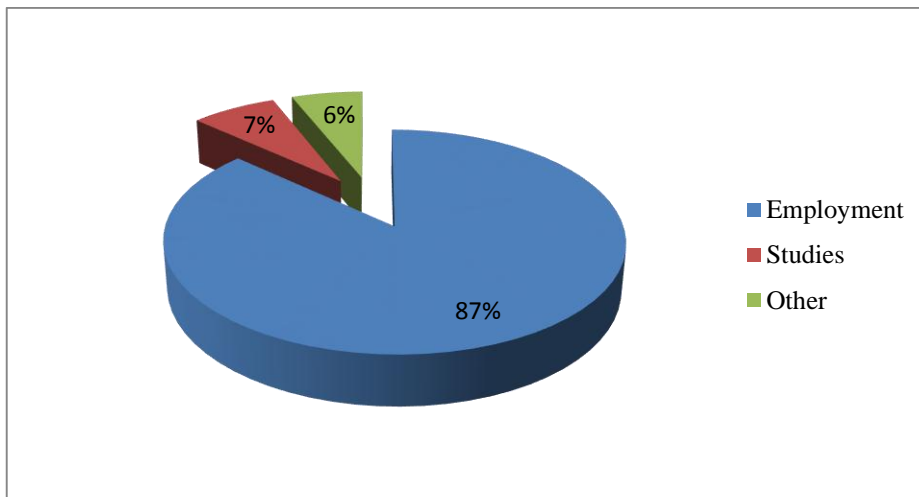
improve their welfare, the majority of them are of the opinion that the government must provide a special allowance and increase current financial assistance, improve income generating opportunities, establish elder homes with improved facilities, and improve free health facilities for the elderly. Most importantly a third of the elderly expect that the government should provide an allowance for the poor elderly. Overall, the above analysis suggests that the elderly population is not satisfied with the current government assistance geared towards elderly.

## **8.5 Support Provided between Migrant Children and Elderly Parents**

Rapid economic and social changes in Sri Lanka have made a significant impact on the migration process in the country. Spatial mobility of people influences the family structure, as well as inter and intra family relationships (Hugo 2002). Therefore, mobility changes the place of residence between generations, which can hamper the exchange of social and instrumental support (DeWit *et al.* 1988). The well-being of the elderly depends on the intergenerational support and physical and psychological health of the aged. Examination of the impact of migration on the well-being of the elderly is appropriate for Sri Lanka, as it has now come to a situation where two major transformations are occurring: growth in international labour migration and the demographic shift towards an ageing population. It has been the tradition of Sri Lankan cultures that adult children to take care of their aged parents by keeping them at their own home (Amarabandu 2004; Silva 2004; World Bank 2008). However, increased outmigration together with improved female labour force participation have made it increasingly impossible for some adult children to co-reside with their parents and take care of their needs. This will be even more difficult when the elderly proportion in Sri Lanka reach advanced age in the future.

In Sri Lanka, both migration has become a major factor influencing families because total internal migrants and international migrants in 2012 had risen to 3,816,787 and 573,208, respectively (Department of Census and Statistics 2013a). The recent 2012 census data indicated that reasons for internal migration are primarily due to marriage, employment and education which accounted for more than 50 percent of all reasons. Figure 8.3 shows that 87 percent of international migrants have left Sri Lanka for employment which was mainly a family or household decision (Department of Census and Statistics 2013a).

**Figure 8.3: Sri Lanka: Reasons for International Migration, 2012**



Source: Department of Census and Statistics 2013a

Migration of household members can significantly influence the intergenerational relationships (Kreager and Schröder-Butterfill 2012). It is clear that migration has been a major change in Sri Lankan households. It has been shown that international migration is often thought to improve earnings for migrants who may then remit more to parents at home (Antman 2012). Moreover, it has also been argued that migration can cause helplessness among older family members due to various reasons, such as when remittances are not imminent, when grandchildren are left behind in the care of older people, when assets have to be sold to find money for childrens' migration, or when elderly become sick in the absence of childrens' help (Kreager 2006; Schroder-Butterfill 2003). Hugo (2002, P 34) argues that the absence of adult children due to migration can have a significant impact on the well-being of the elderly:

“The absence of migrant workers overseas can potentially have detrimental effects on dependent family members remaining behind since they are usually reliant on the economic and emotional support of their children (in the case of the aged) or parents (in the case of dependent children)”.

This study found that 5.7 percent of the elderly receive money from their international migrant children, indicating migrant childrens' financial transfer is a major source of income for some elderly parents. In addition, some 12 percent of the total elderly population interviewed had international migrant children and 83.3 percent received financial transfers from them (Table 8.12). Similarly, 52.3 percent of the elderly in this sample had internal migrant children and 70.1 percent of them were receiving financial transfers from these children. This suggests as Hugo (2002, p. 34) indicated with his

Indonesian rural example, that the lack of funding support for the elderly from the government, together with the absence of economically active adult children in the family due to migration, can have a significant impact on the well-being of the elderly.

**Table 8.12: Elderly According to the Financial Support Currently Receive from Migrant Children by Living Arrangements**

<b>Internally Migrant Children</b>			
<b>Status</b>	<b>Living alone or with spouse only(One generation family) N=73 (percent)</b>	<b>Co-residing with children(Two or more generation family) N=84 (percent)</b>	<b>Total N=157 (percent)</b>
Parents receive financial support	72.6	67.9	70.1
Parents do not receive financial support	27.4	32.1	29.9
Total	100.0	100.0	100.0
<b>Internationally Migrant Children</b>			
<b>Status</b>	<b>Living alone or with spouse only( One generation family) N= 17 (percent)</b>	<b>Co-residing with children (Two or more generation family) N= 19 (percent)</b>	<b>Total N= 36 (percent)</b>
Parents receive financial support	70.6	94.7	83.3
Parents do not receive financial support	29.4	5.3	16.7
Total	100.0	100.0	100.0

Source: Elderly survey 2012

Internal migration appears to be improving the financial situation of elderly parents as the majority of children provide such support to their elderly parents as shown in Table 8.12. However the elderly in one generation families benefit the most. In Indonesia, it has been shown that increased migration means many elderly parents are deprived of the care they expect to receive from their migrant children (Hoang 2011). This has led to the growth in the proportions of the elderly in one generation families and the decline in the proportions of those living with dependents. It is important to note that a substantial proportion of adult children live in close proximity to their parents who are living separately. Therefore, as Kreager and Schroder-Butterfill (2012) found in their Indonesian study on migration and ageing, distant migration appears to be a positive

financial contribution to their elderly parents. It was found from this field study that 70 percent of the elderly parents receive financial support from their children who have migrated internally, and it was more prevalent among those who live in one generation families, with 72.6 percent receiving such support compared to 67.9 percent of those who co-reside with children.

This study found that 38.6 percent of the elderly parents support their migrant children. Financial support and whatever when needed comprised more than 70 percent of all the help provided by the elderly parents to their migrant children. Table 8.13 shows that the elderly still support their children who move elsewhere by giving money when needed, visit them frequently, importantly take care of grandchildren and any other necessary help.

**Table 8.13: Support Given by Elderly to Internal Migrant Children**

<b>Type of support</b>	<b>Percentage</b>
Giving money when needed	41.9
Giving advice	2.3
Taking care of grandchildren	14.0
Do whatever help needed	32.6
Visit frequently	9.3
Total	100.0
	N=43

Source: Elderly survey 2012

The in-depth interviews further showed that some internal migrant children had left behind their children with elderly parents and hence, they still support their migrant children by taking care of grandchildren. The following case study is a good example of how much elderly parents' contribute when children migrate for employment elsewhere and leave their children behind:

Sirisena is an 86 year old elderly man who lives with his wife, Leelawathi, who is 83 years of age. They both live in their home, but the house has been transferred to the daughter's name for her to obtain a loan from a bank to set up a business. His daughter is married to a Sri Lanka Army soldier and have a daughter in the GCE OL class in a public school in Galle. They started living together with their daughter and her family about 15 years ago at the time of the marriage of her daughter. The son-in law, Palitha, serves in the Army in Colombo and travels only fortnightly to his residence back home. Therefore, Siriesena and Leelawathi have become the guardians of their daughter's family left behind by her husband because of his job in Colombo. Sirisena was a clerk in the government sector before retirement and earns about Rs. 22,000 as his

pension, but Leelawathi was a housewife. They had been looking after their grandchild from the time she was born. Leelawathi still cooks with her daughter for the whole family, while Sirisena takes care of the activities of the garden and shopping. In addition, most importantly, he contributes Rs. 10,000 monthly to the family budget because the salary earned by his son-in-law is not enough for the whole family. They think it covers the cost for both Leelawathi and Sirisena's monthly food (C 16, respondent 68).

The survey found that 83.3 percent of the elderly who have children as international migrants receive financial support from them (Table 8.12). It also appears that 94.7 percent of them reside with children compared to 70.6 percent who live in one generation families. International migration of the children seems to be improving the financial situation of the elderly parents, and those who co-resided with their children benefitted the most. This is mainly because most of the international migrant children have left their families with their elderly parents. It is also important to observe from the sample survey that 73.1 of the elderly receive money regularly while 26.9 percent received it when needed. The following case study shows how elderly parents of migrant children improve their economic situation by co-residing with the migrant childrens' families.

Gunasiri (74 years old) and Kusuma (69 years old) co-reside with their youngest son who has migrated to Doha for employment. Therefore, these elderly parents have moved into their son's home in order to support his family. At the same time, their son's family also takes care of their daily needs, since they reside with them. Most importantly they receive emotional support help from two young grandchildren who are 10 and 7 years old. In addition, their son and daughter who live separately, also take care of their health by taking them to clinics for regular health checkups. They also buy their medicine when needed. Whenever the son sends money from overseas to his family, the parents also are given some money - on average ranging from Rs. 2000 to 4000 per month (C 17, respondent 59).

At the same time the majority (55.6 percent) of the elderly support their international migrants and their families in a variety of ways. The following case study demonstrates how vulnerable elderly parents are when they have migrant children who have left their families with them. In many cases elderly parents do not have a choice and support the migrant's family until his/her return.

Jayawathee is 71 years old. Her daughter has three children: a 12 year old daughter, 10 year old son and a 5 year old daughter. Daughter's husband is working as a driver in a factory. Since they are very poor she decided to go for a job Middle-East. Jayawathie started living with her daughter's family after her daughter went to Dubai for employment, leaving behind her family with her mother. Jayawathi's husband who is 72 years old is also living with their son in



their family because they need his support to look after work in the family such as taking grand children to school and tuition classes. So she is worried because she and her husband cannot live together and thus they cannot help each other. She said that 'I like to help my daughter's family because they can earn much money by doing a job abroad, but looking after grandchildren is a risk when the mother is absent. I can feed them and do other work but I cannot help them in their studies. When I feel children are not studying properly I get frustrated, but cannot inform my son-in-law because he doesn't listen. However, when the complaints come from the school for the childrens' bad behaviour, my son-in-law starts scolding me and my daughter. I cannot tell those stories to my husband or my son because I do not want to create any conflict during my daughter's absence. Although I do all the housework without any help in my old age, my son-in-law does not care. I cannot tell my daughter because she expects me to look after her family until she comes back. I'm not in good health to take such a big responsibility, but I have no any other choice. So I cannot go for regular treatment to check my blood pressure and joint pains. I am trying to hide all of my difficulties to make peace in the house until my daughter returns. She sends money every month for family needs since they have to recover loans, but that is not enough sometimes. However grandchildren always demand so many things and are always blaming me by saying that I am not treating them well. So I am pleading every day to my daughter to come soon before children get spoilt with bad behaviour. I feel I need a rest now because this is too much for me, although I try to do my best help the family' (Case 08, Respondent 35).

Kusakabe and Pearson (2010) with data from Thailand suggest that sending money by the migrants to their families can be better understood as a reciprocal process rather than one way financial support from the migrants to the families of origin. In the reciprocal relationship there are high expectations that the family at the origin will provide care for their children. Overall, both internal and international migration of children have helped elderly parents to improve their financial situation but in turn, the elderly also have provided their support not only with money when they need it but also by looking after their families left behind and taking care of grandchildren.

## **8.6 Well-being of the Elderly**

Assessing the well-being of the elderly is not a major objective here but it is useful to examine whether their well-being differs by their living arrangement status. This study developed some useful indicators of well-being which were derived from field data. A similar procedure to Kaneda *et al.* (2011), was followed which computed an 'Index on well-being of older populations'. In this exercise, material, physical and social well-being was used to produce a composite index to determine the well-being status of each living arrangement type, as well as for the total elderly population. The material well-

being index comprised the percent with monthly income more than Rs. 5000, percent employed and percent with savings, while the physical well-being was measured by having excellent health conditions and do not require any ADL support. The social well-being was measured by receiving moral support from adult children and the percent of elderly who perceive that society respects the aged. The scale of the well-being index ranges from 0 to 100 indicating 100 as the full well-being status.

Overall, Table 8.14 shows that the well-being status of the Sri Lankan elderly is not very satisfactory being 41.1. However, those who co-reside with children have a better well-being status in every aspect considered. It is also interesting to point out that the material well-being status is the lowest while social well-being status records the highest among the three categories of well-being.

**Table 8.14: Indices of Well-being of the Elderly by Different Components of Well-being and Living Arrangements**

Living Arrangements	Overall well-being	Material well-being				Physical well-being			Social well-being		
		Domain	percent Income more than Rs. 5000	percent Employed	percent Having Savings	Domain	percent Having excellent health condition	percent Do not require ADL support	Domain	percent Receiving moral support from adult children	percent Perceiving that society respects the aged
Living alone or with spouse only ( One generation family)	39.0	21.5	10.7	15.3	38.7	50.4	10.1	90.7	45.1	28.3	62.0
Co-residing with children ( Two or more generation family)	43.3	30.1	18.7	22.3	49.3	43.3	8.7	78.0	56.6	50.4	62.8
Total	41.1	25.8	14.7	18.8	44.0	46.8	9.4	84.3	50.8	39.3	62.4

Source: Author's calculations from Elderly survey 2012

## 8.7 Conclusion

The elderly survey found that elderly people are not just merely recipients of support irrespective of their living arrangements and various demographic and socio-economic characteristics. It was found that age, gender, marital status, number of children still alive and place of residence are the major determinants of economic transfers. Moreover, there was a significant proportion of elderly without financial, material and social support from their adult children. Traditionally elderly are being regarded as the receivers of the support from their adult children but it was found that a substantial proportion of elderly are currently supporting their adult children, as well as grandchildren. It was observed that a higher proportion of elderly in one generation households are involved in household activities compared to the elderly who co-reside with children, because the latter category is obviously helped by their co-residing children. This study suggests that elderly who co-reside with children receive more ADL support from their adult children than elderly living in one generation families. Those living in one generation families receive support mainly from their spouse and most importantly by relatives and others. In contrast, assistance for daily living for elderly who co-reside with children is given by their children and to some extent by their spouses. In terms of healthcare for the elderly, the study found that a higher proportion of the children take the co-residing parents for healthcare treatments while majority of those who live in one generation families attend by themselves. Furthermore, those who co-reside with adult children receive more moral support than those who do not. The awareness of the facilities provided by the government seems to be limited among the elderly population and seen to be inadequate. This study also found that migrants (both internal as well as international) give financial support to their elderly parents. At the same time, elderly still support their migrant children by various ways, such as providing money necessary help when needed, visiting them frequently and most importantly taking care of grandchildren. It was found that intergenerational wealth flows of all the types are flowing in both directions at different levels. The next chapter, which is the concluding chapter, summarises the major findings, new theoretical underpinnings as well as policy implications arising from this study.

## **CHAPTER 9**

### **CONCLUSION AND RECOMMENDATIONS**

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#### **9.1 Introduction**

Population ageing and transformation in the role and functioning of families have been occurring simultaneously in Asian countries like Sri Lanka. Yet the inter-relationships between the two processes have been little examined. The growth of Sri Lanka's older population is rapid but the majority of the nation's older population are still in the 'young age' groups. Hence, the full impact of increased demand for financial, material and social support of old-old groups has not yet been felt. Traditionally their support needs have been met by the family, especially adult children but there is uncertainty of the extent to which the children are able and willing to provide this support. At present there is extremely limited investment of the Sri Lankan government in social protection for the aged population so any reduction in family support has important implications for the well-being of the elderly. This is the area in which this study seeks to make a contribution.

This chapter presents some conclusions drawn from the study, assesses the extent to which its objectives have been achieved, and discuss the theoretical and methodological implications arising from the study. It concludes a number of policy recommendations for policy makers and planners as well as several future research directions.

#### **9.2 Major Findings of the Study**

The overarching aim of this study was to examine the complex relationship between these two rapidly changing elements of Sri Lankan society: rapid ageing and the transition from an extended to a nuclear family system. Six specific objectives were investigated.

##### **9.2.1 The Extent, Nature and Speed of Population Ageing in Sri Lanka**

The timing of the onset of ageing was investigated because timing is crucial in linking it with the onset of changing family roles and to understand the socio-economic and demographic contexts within which those two events were occurring. Sri Lanka has

experienced a gradual demographic transition over the past fifty years. Decreasing fertility along with lengthening life expectancy has produced a restructuring of the age structure of the population in Sri Lanka skewing it from younger to older groups. Demographic ageing of the population began during the 1980s as the population over 60 years of age made a clear upward trend which has continued. The proportion of population 60 years and above is expected to increase from 9.2 percent in 2001 to 21.9 percent in 2030. Moreover, the average annual growth rate of the population over 60 years of age in Sri Lanka was greater than that of the total population between 1980 and 2012. Accordingly, Sri Lanka's age-sex structure is shifting from pyramidal structure in the 1980s to a flat pillar shape through to 2050. The Index of Ageing also commenced its upward trend from the 1980s. The ageing process will accelerate during the next four decades and since women have a higher life expectancy than men the majority at older ages are women.

### **9.2.2 Nature, Trends and Patterns of Family Structure and Functioning**

Family as the key institution of social organisation in any society is defined by exchanges of mutual support between its members. Changing demographic, social and economic changes are analysed in chapter 5 and help explain profound changes in the size and composition of Sri Lankan families and the decreasing importance of extended families. Hence, the social environment in which people age is changing in Sri Lanka as a result of the changing size of families, the changing roles of traditional extended families and, most importantly, perceptions of intergenerational support and caring for older persons. In particular, this has been a shift from the dominance of the emotionally extended to the emotionally nuclear family. The implications of these profound changes for support and care for older persons depend on the way such changes have been analysed. Although studies have often looked at such changes from a period perspective, this study examines them through a cohort perspective. It analyses the information gathered from elderly respondents by examining their relationship with their parents, and with their children and grandchildren. Such an analysis is essential to understand the transformation from the traditional to modern family through the eyes of those generations who actually experienced the various demographic, socio-economic and cultural changes. It was found through various indices that the role of the family began to change from the middle of the last century although changes in the structure and nature of family intensified in the 1980s.

In the present day, Sri Lankan older people have very limited access to formal mechanisms of social protection and hence rely mainly on their family and the local community for support. In Chapter 5, it was shown that these informal protection mechanisms have been under increasing stress, owing not only to the process of population ageing but also to diminishing family economies, improved education of children, including women's education and higher female labour force participation, as well as the changing perceptions about caring for parents and older persons. Furthermore, the gap is widening between elderly parents and their children as a result of the younger generations' increased involvement in economic and social activities outside the home in the current highly competitive money based society where adult children have become more individualistic. One of the other recent noteworthy changes in the Sri Lankan family is the steady increase in women working outside the home. Moreover, increased international labour migration has meant that many Sri Lankan families are transnational with some family members residing in different countries.

Other cultural and social factors, such as delayed marriage and an increase in the never-married population have also influenced families. The never-married population has significantly increased after 1981 and consequently the married proportion has declined. This has resulted in more young adults at marriageable ages still living with their parents often increasing the strain on family resources. Therefore, the changing nature of marriage is an important factor influencing the changing role of the family. The proportion of single person households is increasing with the addition of a new family type in Sri Lanka. Another important change observed was the growth in the number of female-headed households which comprised a significant number of elderly widows. These reflect important changes that have occurred in values and lifestyles in Sri Lanka in the recent decades.

### **9.2.3 Implications of Changes in the Family for the Well-being of Elderly**

All the factors described above have generated rapid changes in the size and structure of families and the relationships between family members. These changes have important consequences for the welfare and living arrangements of older people. Smaller nuclear families and solitary living significantly affect their welfare. Solitary living in developing countries is particularly problematic because of the limited formal social

support programmes available for older persons (United Nations 2005). In addition, lack of funds and human resources restrict the availability of institutional care in developing countries, including Sri Lanka. Although there are limited institutional care facilities available in Sri Lanka, the number of elderly entering elderly homes is now growing. Most of them are never married elderly, while some have been the victims of the ill-treatment of the children, although the traditional expectation is still to look after aged parents.

It was observed in Chapter 6 that 60 percent of elderly living in one generation families have at least one child living in close proximity. Although the proportion of extended family has declined, a child living in close proximity to his/her parents' home establish a de-facto relationship between parents and children. Children leaving home after marriage is now inevitable in the Sri Lankan society as described in Chapter 5, because they want to establish an independent life with their own immediate families. However, this has led to a significant proportion of elderly living in one generation families. In addition, an increased proportion of single elderly are living alone in one generation families with the expectation of someone to care for them.

Co-residence of older and younger family members is usually regarded as the central component of lifelong reciprocity arrangements (Vos *et al*, 2008). Co-residence with children mainly depends on the availability of the number of living children. In this study, it was observed that the total number of living children is positively associated with the co-residence of the parents. In this regard, the oldest-old are in a more favourable position since they have more living children than the younger aged cohorts, as a consequence of fertility decline which has produced fewer children to look after them. This study also found that childlessness has made many elderly live alone with more than 80 percent of those who living alone being childless. Furthermore, children who are still unmarried live with their parents but most of these parents are primarily younger aged. This analysis further showed that most of the elderly own their homes and it is expected that one child would remain in the house even after marriage and take care of them in their old age. When urban and rural differences are examined, it was observed that more rural elderly co-reside with spouse or children than urban elderly. This is because rural elderly are more burdened with financial issues, household work and health issues compared to their urban counterparts.

The elders who co-reside with children are better off because they have more income sources such as pensions, salary from current employment and savings. In contrast, more elders who live in one generation families have less income sources and mainly depend on government support geared for poor people which is perceived to be insufficient for their well-being. Since co-residing elderly are financially better off, it was also observed that they tend to be involved in more social activities with some expenses for social activities. Overall, this study showed that those who co-reside with an adult child in their own home have more income for their essential needs.

#### **9.2.4. Implications of Internal and International Migration for Care of the Elderly**

Increasing internal and international migration has had implications for the well-being of older people. It was shown in this study that migration has emerged as a central strategy of family networks in Sri Lanka, with more than half of the elderly associated with internal migrant children, which is significantly higher than those who have international migrant children. This study examined whether significant migration flows, both internal and international, can be a major cause to the diminishing importance of the extended family. It was found that migration of younger members of the family can increase the probability that older persons will become socially and economically vulnerable. This study further showed that migration also has negative implications for the ADL support that older persons traditionally received from children and hence mobility has led to a reduction in the overall support that older persons receive from their children.

One of the major reasons for the elderly living in one generation families is that the majority of their children have migrated internally with some others migrating internationally. It was found that the elderly living in one generation families have more children who have migrated internally while 63 percent compared to 80.9 percent of elderly who live with their spouse. Similarly, 21 percent of elderly in one generation families have children who migrated overseas while those co-reside with children in their home and child's residence have 13.5 percent and 14.3 percent, respectively. It was mentioned previously that about half of the adult children have migrated to a place within the same district of residence where their parents live and established a de-facto relationship with the elderly parents who live in one generation families.



This study found that internal migration of the children often has improved the financial situation of the elderly parents, as it was found that more than half of the children provide support to their elderly parents across all living arrangement categories. The study further showed that 95 percent of the elderly who co-reside with children receive financial support from internationally migrated children while 70 percent of elders in one generation families receive financial support. Adult children who have left their families behind in the care of their elderly parents provide more financial support to their elderly parents. Hence, those elderly receive more financial support from their children. In turn, they also support the families of migrant children by helping with household chores, looking after grandchildren and other family responsibilities. However, this study showed that although their financial situation is improved because of migration of the children, their physical and social support tended to decline which is very important at advanced ages.

#### **9.2.5 Impact of Changing Intergenerational Roles on Population Ageing**

The Madrid International Plan of Action on Ageing has paid great attention to find ways of strengthening solidarity between generations in the context of the population ageing process (United Nations 2002). This aspect was examined in order to find the shift of wealth transfers between parents and children from traditional to modern society in Sri Lanka. Since Caldwell's proposition was used as the basis to examine changes in the mode of production and values system related to old age support they have been seen as the primary determinants of such change. This study showed that there has been a shift in wealth transfers from its traditional standing to present modern status in Sri Lanka mainly due to the changing mode of production. This analysis revealed that parents in the modern family setting, direct more wealth towards their children until their children are educated and become economically independent with appropriate employment. Therefore, it was very clear from the analysis that there was a shift in wealth transfers from parents to children during their life course in the modern family setting, where parents have become sole investors in their childrens' education and health. Chapter 7 showed this shift in net wealth transfers towards children in Sri Lanka.

In contrast to the life course developments, Chapter 8 examined the current intergenerational transfers between elderly parents and their adult children. Current net intergenerational transfers were measured through interviews with both the elderly and their adult children. The current net transfers between elderly parents and adult children revealed that the elderly parents were mainly at the receiving end. Examination of net transfers by type of transfers revealed that the net financial transfers are upward from adult children to parents, but elderly who live in one generation families benefit more than their co-residing counterparts. The material net transfers are also upward from children to elderly parents but more for the co-residing parents compared to those who live in one generation families. The net social transfers (moral/emotional support) are also upward from adult children but more on co-residing parents. Although half of the elderly living in one generation families do not receive social support from their adult children, they receive more support from the community. If the current net transfers are upward from adult children to parents, it does not mean that elderly parents do not provide any support to children. Detailed interviews found that elderly parents are not just merely recipients of support, but in some instances provide significant support to their adult children. It was also observed that when the elderly have more capacity to support their adult children, they tend to receive more support from their adult children. Furthermore, this study revealed that as the level of net transfers is higher among the co-residing elderly, their well-being status is also relatively high. Moreover, the percentage contribution to the material, physical and social well-being to the total elderly was found to be below average. It is higher than who co-reside with children compared to those who live in one generation families. In addition, data showed that the low level of well-being status of the elderly in Sri Lanka is further limited by the lack of pension schemes and other social protection facilities available for the elderly.

### **9.3 Policy Implications and Recommendations**

Examining the policy implications arising from the study of the changing role of the family and ageing population is one of the specific objectives of this study. As there are scarce resources available for the general population in the country, the living arrangements of the older population will have a high impact on the overall demand for formal support systems. Therefore, examination of the factors influencing the living arrangements, intergenerational (familial) support and public support systems of the older population will assist policy makers engaged in addressing the needs of the older

population. Sri Lanka still has a demographic dividend due to the growing youth population and hence, there is a window of opportunity for economic development (World Bank 2012). However, at the same time population ageing also poses important challenges, especially relating to the financial capability of pension systems, the costs of health-care and the incorporation of older people as active agents of societal development (United Nations 2014). In addition, the rapid ageing of the population may pose particular challenges for public policy, as major adjustments in a variety of spheres (United Nations 2007b). Preferably, policy responses should be put in place ahead of time to ease adaptation to this long-term ageing process because its consequences depend on the measures developed to address the challenges it poses (United Nations 2007b). Changes in the living arrangements of older people, have important policy implications since Sri Lanka confronts the challenge of providing basic infrastructure and social services to older people, in addition to provision of increased formal long-term care and developing new forms of informal care.

This study found that the provisions available are either not known to the majority of elderly or they are inadequate to address the well-being issues of the elderly, especially in the context of declining income, deterioration of health as age advances and inadequate ADL support. However, the policies and actions introduced by the GOSL to date are as follows (United Nations 2008, p. 83). The policy implications raised from this study support to the need for policies to be more focused on the changing role of the family and ageing.

- National Committee was established in 1982 under Department of Social services
- In 1993, National Policy for the Elders was formulated with the objective to prepare the elderly population for a productive and fulfilling life in old age and ensure the independence, participation, care, self-fulfilling and dignity of the elderly.
- As it was felt that legislation and an administrative mechanism for implementing these policies were necessary, legislation on the protection of the rights of Senior Citizens was enacted in 2000 (Act No.9 of 2000). This act provided for the establishment of a Statutory National Council for Elders and a Secretariat, Maintenance Board for determination of claims from the elders, National Fund for Elders and Protection of rights of elders.
- The cabinet of ministers adopted a National Charter and National Policy for senior Citizens in 2006.

**Recommendation 1:** Devise an appropriate policy strategy to improve welfare of the elderly who live alone without their spouse or children

The trend of the elderly living alone is likely to continue and will have important consequences, especially for older women, who are most likely to live alone. Solitary living can result in increasing isolation and makes care-giving by family members more difficult to organise. It increases the need for supplementary support services in order to enable older persons to remain in their own home. Sri Lanka may have difficulties in providing such services. Family changes produced by industrialisation, increasing female labour force participation, declining family size, diminishing importance of extended families and increasing internal and international migration and amid other factors have important implications for the well-being of the elderly in developing societies. The rapid changing role of the family is challenging traditional intergenerational support systems, hence there is a need for better integrated policy responses required to meet the well-being of aged population.

However, it was found here that those who live alone are more burdened than their counterparts in other living arrangements. This phenomenon is more likely to occur in the near future and thus, the government has to devise an appropriate policy strategy to accommodate the interests of the elderly living alone in order to improve their well-being.

**Recommendation 2:** Government should focus its policy attention more on the elderly who do not have any children

The average number of children per family in Sri Lanka is declining and the childless families are increasing. It will thus become increasingly difficult to maintain the current forms of informal long-term care arrangements. The study showed that one of the important demographic factors that determine the living arrangements of the elderly in Sri Lanka is the number of children still alive. It is generally believed that, in traditional societies including Sri Lanka, that children are considered as security during old age. An increasing proportion of the elderly do not have children either due to childlessness associated with infecundity or they have remained single. This can affect their security in old age as they have no children to look after them for their various needs. From a

policy perspective, this is very important because these elderly needs special assistance from the government.

**Recommendation 3:** Carryout a study on national transfer accounts to understand national transfers to different generations and their income, expenditure, savings and consumption patterns in order to measure, analyse and interpret macro-economic aspects of age and population ageing.

This study explored whether the changing role of the family has any impact on intergenerational transfers between elderly parents and adult children and found that the accumulation of wealth and intergenerational transfers is important. From a policy perspective it is necessary to establish the level and nature of private transfers to determine government debt, social insurance, and public transfer programmes (Mokomane 2013; Köhler 2009; Gale 1998). Similarly, the saving behaviour and consumption patterns of the population can also be affected by the level of intergenerational transfers. In this regards, an analysis of National Transfer Accounts is important because it measures, at the aggregate level, the reallocations that shift economic resources from one age group to another, because such reallocations occur at some ages, individuals consume more than they produce (Lee and Ogawa 2011). Similarly, at other ages individuals produce more than they consume. Therefore, such an analysis can document the means by which the young and the old, those with lifecycle deficits, draw on the lifecycle surplus generated during the prime working ages.

**Recommendation 4:** Devise a mechanism of improving healthcare facilities of the elderly including their mental health issues at all levels.

The existing health systems in Sri Lanka are still mainly geared towards providing care for acute episodic conditions and not towards chronic care needs and care that is specific to older persons. Over the years Sri Lanka has seen a trend of obtaining health care through private hospitals whereby people pay for services directly out of their own pocket. Healthcare needs are provided to their elderly parents by both co-residing children as well as those who live independently, although the level differs. The elderly who co-reside with children receive more health care support than those who live in one generation families. Moreover, the healthcare support comes in a way of non-monetary and moral support in comparison to financial support. Since it was found that healthcare

of elderly do not meet expectations, irrespective of their living arrangement status, the government needs to devise a mechanism to attend to the healthcare needs of the elderly.

The survey found that majority of aged in Sri Lanka have at least one illness and have been taking medicine for a long time. It is timely to develop geriatric health facilities to which older people have easy access. This can also be done by establishing such facilities in each DS divisions by introducing health clinics for the aged. In this regard, it is essential to integrate primary prevention and primary healthcare for elderly using the Personal Health Care(PHC) network of the Ministry Of Health(MOH) for geriatric assessment, prevention and rehabilitation. Furthermore, mental health facilities for the elderly are still not developed properly in Sri Lanka. This service is essential for those who have age related mental health issues. Currently there are no suitable procedures to identify the aged with dementia and issues with family members. Early identification of those issues can enhance the welfare of the elderly.

**Recommendation 5:** Create a programme to improve the financial position of the elderly by devising a special programme of income generating activities for the elderly, as well as providing financial support from the government for those who are financially burdened.

The study found that half of the elderly are without financial support from their adult children. At the same time, it was observed that more than fifty percent of elders are economically active. This suggests that the creation of suitable income generating activities for the aged can enhance their well-being. In-depth studies of elders have shown that although they are capable of doing work, it is difficult for them to find suitable employment at older ages. Since the majority of aged in Sri Lanka are in the young old category, they still can engage in productive economic activities which will improve their family welfare. This study found that many of them still had dependent adult children. Therefore, the increase in current retirement age from 60 to 65 would allow them to work for another five years and support their young dependents until they become financially independent. This is possible because of improved life expectancy during the recent decades.

**Recommendation 6:** The Government should devise appropriate mechanisms to enhance welfare facilities of the elderly

In Sri Lanka, similar to most of the developing world, which has experienced the demographic transition, there has been a shift from extended to nuclear families, and an increase in one person households. These changes have important consequences for the welfare and living arrangements of the elderly population. This study found that more than half of the elderly people do not receive any government assistance. Therefore, they have to either depend on income by engaging in some further employment or rely on the support of their adult children or others. The majority of the elderly who co-reside with children receive a pension and provident fund from public/private sector employments. In contrast, more than half of the elderly who live in one generation families were on the government's poverty alleviation assistance which was inadequate. Most importantly, the awareness of the facilities provided by the government for the elderly welfare is limited. In this respect, the majority of the elderly are of the opinion that the government must provide a special allowance and increase the current financial assistance, improve income generating opportunities, establishment of elder/care homes with improved facilities and improve free health facilities for the elderly.

**Recommendation 7:** The government should take the initiative with the support of the private sector to establish an adequate number of aged homes with satisfactory facilities or encourage private investment like in developed countries.

With a rapid ageing process taking place and especially the accruing of a significant proportion of the elderly in the oldest age group, it will be necessary to expand the supply of formal long-term care for older persons, especially institutional living which can provide the necessary health care and other facilities. Since Sri Lanka still does not have a significant proportion of elderly at oldest ages, the number of institutionalised elderly is relatively small. At the same time, the elderly homes available in the country are just called 'Adult Homes' where only very limited facilities are available. They are just a shelter for those who have been abandoned by children or relatives and contain very limited facilities. These are mostly run by charitable organisations but presently a few private sector companies have started establishing aged homes with improved facilities for the provision of healthcare. There is a necessity from the policy point of view, to establish properly equipped aged homes in order to respond to the rapidly growing ageing population in the country.

**Recommendation 8:** The government should ensure a supportive environment in the family and community for the elderly with appropriate legal rights to guarantee their well-being

Assuring and protecting the human rights of the elderly is an important means of reducing the risk of abuse of older persons and empowering them (United Nations 2014). In this regard, complementary legislation is needed to improve the legal framework in order to protect the rights of the elderly, prevent abuse and neglect and strengthen their opportunities for participating in all aspects of social life. Similarly, there exists a need in Sri Lanka to identify sufficient mechanisms through which to avert age discrimination in labour markets, guarantee intergenerational solidarity through adequate old-age income security systems and to thereby activate the resources needed to supply adequate health and long-term care.

In Sri Lanka, the family and the community are the main supportive groups for elderly. However, it was found that the changing role of the family has significantly altered this supportive environment. This is due to the fact that significant proportion of the elderly live alone with limited material, physical and social support. Therefore it is essential to strengthen the supportive environment in the family and the community with some legality. In this regard, intergenerational supportive systems have to be strengthened by emphasising mutual gains and support, strengthen community based supportive systems for the aged who have never married and are childless.

## **9.4 Theoretical Implications**

When examined the theories related to changing role of the family and ageing, it was found that there were no single theory which directly focus upon that relationship. In this study, various theories stemming from demographic perspectives on ageing, sociological aspects on ageing, and on changing role of the family and intergenerational transfers and relationships were reviewed and examined. However, it was found that most of the theories overlap each other but provided opportunity to identify major factors that exhibit the changing role of the family and ageing. Based on all the theories and prepositions, this study was able to produce a conceptual framework which categorised the factors that are influencing ageing population in to two categories: explanatory and intermediate variables of ageing population, which were not explicitly



available before. This study hypothesised that the changing role of the family makes an impact on the ageing population via intergenerational transfers/relationships and hence, intergenerational transfers/relationships become intermediate variables. It was shown that such a conceptualisation makes easier to understand the changing family role on ageing population by reducing the complexity of factors affecting ageing population. Hence, it is expected that treating intergenerational transfers/relationships will provide a new conceptualisation for ageing studies.

This study proved the importance of placing the analysis of changing role of the family and ageing population within the conceptualisation put forward by both Caldwell (1982) and Hugo (1997) as indicated in chapter two. Although Caldwell's main intention was not to examine the ageing process but he mentioned that in traditional societies, parents expect to receive economic benefits from their children but this is reversed in modern societies when children are sent to school in order to make them engaged in future production activities with the change from family economy to capitalist mode of production. It implicitly assumes that old age support will diminish in modern societies with fewer numbers of children to take care of elderly parents. Hugo (1997, p. 113) claimed that elderly were in more favourable position in traditional society and hence, the net intergenerational life time flows of wealth is very much in favour of older generation. However, in the modern society flow of wealth, commitment, and loyalty are strengthened from parents to children and laterally between upward flows to parents may be reduced.

This study proved that there is a shift from wealth transfers from traditional to modern society which made children more dependent with involvement in formal education until they become economically independent. It was shown in this study that education, especially female education, diminishing family economies and correspondents rise in female labour force participation, growth of internal and international migration, changing marital status were key factors of change. Hugo claimed that modernisation influences the relationship between the reversal of net intergenerational wealth flows and the well-being of the elderly. It was observed in the chapter 5 of this study that factors such as changing family type extended to nuclear; changing size of the family; changing relationship between parents and children, status of women within the family; changing type of economy of the family and modern life pattern of children has created inequalities between elderly and adult children generations. Hugo's important extension

of the theory of wealth flows was useful for this study because it was observed that more and more adult children have started establishing nuclear families, due to modernisation effects. However, the study has further shown that the declining of total number of children still alive also significant impact on well-being of elderly population. Most importantly, this study observed that the trend of adult children is to move away to set up their own home and thus establish de facto relationship with parents in order to take care of them. Furthermore, the study also showed that migration of their children has improved the financial situation of elderly parents but at the same time they are made obliged to take care of families (especially minding grandchildren) of international migrant children.

Unlike most other studies of ageing, this study examined the net transfers between the parents and children generations by separating out the life course transfers and current transfers. Although the children are receiving more benefits until they become economically independent, when current net transfers are examined, the situation is vastly different. It was found that generally, the financial transfers are upward from adult children to parents but who live in one generation families benefit more than their co-residing counterparts. In contrast, more of the co-residing parents receive material support from their children compared to those who live in one generation families. The social (moral/emotional) transfers are upward from adult children only with regard to co-residing parents but elders who live in one generation families receive more support from the community. This study further showed that elderly parents are not just merely recipient of support in Sri Lanka as revealed from some Asian studies (Pfau and Giang 2009; Schroder-Butterfill 2003), since substantial number are involved in giving support to their adult children and co-residence children get more support. Furthermore, this study shows that when the capacity of supporting children declines, the elderly parents' well-being status also falls. Accordingly, there is a strong association between the net transfers and well-being. This study was able to demonstrate both the magnitude and the direction of the wealth transfers between elderly parents and adult children in the context of changing family roles and ageing population.

## **9.5 Methodological Implications**

From the time that Caldwell proposed his synthesis on the direction of net intergenerational wealth flow, there had not been any standard quantitative measurement to determine net intergenerational wealth flows. The main methodological contribution from this study comes from the examination of intergenerational transfers/relationships between the elderly and their adult children. Available literature do not show any definite methods of measuring intergenerational transfers but categories of those transfers such as financial, material and social support have been suggested. This study was designed in such a way that measuring the net transfer of wealth between the two generations was made possible. The field work was designed to capture those transfers by asking specific questions to determine the percentage of receiving and giving transfers between the elderly and adult children generations. The difference between the two proportions was taken as the net transfer of wealth between the generations. Therefore, the study adopted a method which could quantify the net transfers and draw a conclusion about the direction of the net intergenerational wealth flow.

Most importantly, this study added another dimension such as healthcare and the impact of migration on wealth transfers. The analysis was carried out by determining three types of combinations of interactions which is possible between the two generations: elderly parents who live alone/ with spouse in own home (in one generation families) and the adult children who live independently; Elderly parents who co-reside with children and those adult children who live independently; elderly parents who co-reside with children and their co-resident children. Data for this study allowed the examination of both the direction and the magnitude of the intergenerational transfers/relationships, including how migration of children affects the wealth transfers by adding a new dimension to ageing studies.

## **9.6 Future Research Directions**

The study answered important research questions arising from the changes taking place within families with the transition of the society from its traditional to modern form that affected ageing population. However, some of the questions were not answered, especially in relation to health issues which are mostly non-communicable diseases that

will be prevalent in the third stage of the epidemiological transition. These were not answered because they were not major objective of this study. However, one can examine the prevalence of such diseases as well as the socio-cultural factors that modulate health perceptions, illness perceptions and interactions between potential consumers and providers of healthcare services. This is mainly because the elderly health conditions are an important cause of morbidity and premature mortality. Such research can have a greater bearing on the policy directions of healthcare and hence improve the physical well-being of the elderly.

Social determinants of health of elderly population should be addressed as it will be more important to promote accessible communities for older persons such as ensuring barrier-free public spaces, fostering intergenerational co-residence and providing support for assistive technologies.

Research with the use of National Transfer Accounts (NTA) framework seems very useful for a country like Sri Lanka because of its ability to estimate consumption, production and resource allocations by age. Although the study examines the intergenerational transfers with the use of micro level data collected to achieve the objectives of this study, the NTA will provide an opportunity to analyse key features of transfer systems, especially how resources are shared across generations which is one of the important determinants of intergenerational equity and poverty. The NTA can also be used to examine the second demographic dividend arising in response to the prospects of population ageing. In a middle-income country like Sri Lanka which relies on capital accumulation to meet the retirement needs of the elderly, population ageing provides a powerful incentive to accumulate wealth. This aspect has not been explored so far and hence it is essential to focus research on this issue.

It is clear from this study that the elderly population is being feminised at a rapid pace especially due to women living longer than men. Therefore, older women requires special attention because of gender inequalities in education, employment, health care and other welfare services at every stage of life that can make elderly women more vulnerable with their low income levels. These inequalities become harder as women grow older in larger numbers because many of them will lack the resources, social support and legal protection to access such opportunities and services. As a result, elderly women are more likely than older men to experience poverty. This study found

that elderly widowed women are the most vulnerable category of the aged and hence, it is essential to examine the feminisation of poverty of the aged by looking at their vulnerability in relation to poverty and discrimination.

It is also necessary to carry out a survey in all districts with more representative sample, following longitudinal framework for few years in order to gather behavioural patterns of the elderly as well as adult children which is current need for enhance the well-being of the elderly. Areas such as migration, ethnicity and urban rural differences need more attention with more representative sample.

## **9.7 Conclusion**

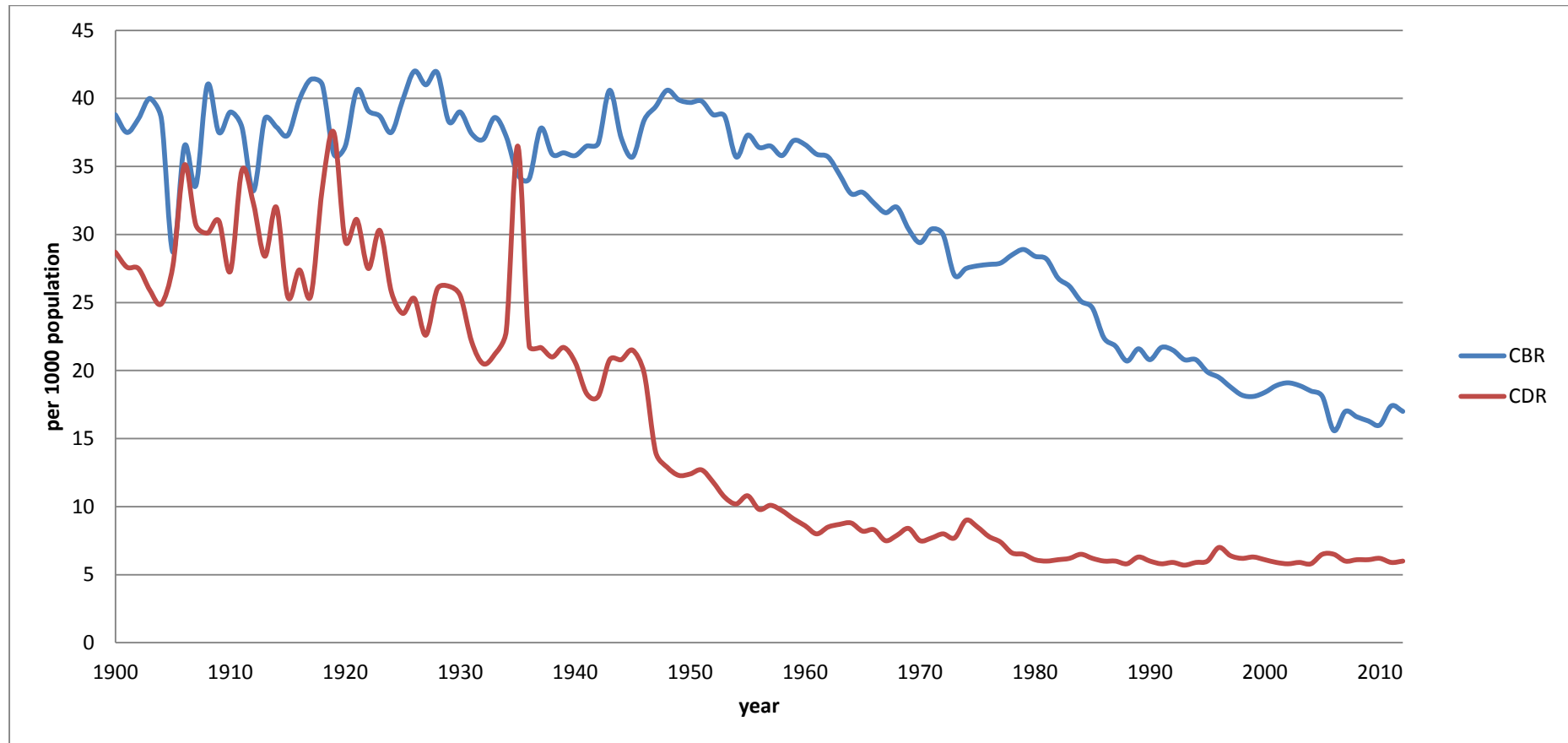
This study has succeeded in explaining not only the relationship between the changing role of the family and ageing population in Sri Lanka but also by providing an useful conceptualisation to explain that relationship which other researchers will be able to use. It is expected that this study has provided meaningful theoretical and methodological contributions in explaining the relationship between the changing roles of the family and ageing populations. It has also demonstrated how the importance of examining the timing of the onset of the ageing process and changing family roles. The occurrence of these events and their relationship to the generations that were exposed to them at specific time periods have given rise to their distinct demographic and socio-economic behavioural patterns. The study also explored how elderly parents and their adult children support each other through wealth transfers because the direction and volume of such transfers can unearth the status of the well-being of the elderly. This was useful because it was found that intergenerational wealth flows are not one way and there can be a substantial flow from the elderly to children to assist in facilitating their economic independence and thereby creating a reduction of social and economic risk. Therefore, elderly can be regarded as central pillars of multi-generational families.

The study also examined the characteristics of the two generations and found they differ in nature, especially their capabilities to transfer wealth between them. In that context, the study explored the intergenerational transfers in terms of financial, material and social, but it further included the impact of migration on the relationship between the two generations, as a substantial majority of the adult children were migrants. It was very clear that the contribution of this study is substantial as the study was able to

conceptualise the intergenerational transfers/relationships in a developing country context. This will provide an unique opportunity to expand the knowledge about the intergenerational transfers between the elderly and their subsequent generations.

## Appendices

### Appendix 1: Demographic Transition in Sri Lanka



Source: Data Obtained from DC and S and Registrar General Department

## Appendix 2: Ethical Approval



RESEARCH BRANCH  
RESEARCH ETHICS AND COMPLIANCE UNIT

BEVERLEY DOBBS  
EXECUTIVE OFFICER  
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CRICOS Provider Number 00123M

5 April 2012

Professor G Hugo  
School of Social Sciences

Dear Professor Hugo

**ETHICS APPROVAL No: HP-2012-008**  
**PROJECT TITLE: Changing role of the family and ageing in Sri Lanka**

I write to advise you that the Low Risk Human Research Ethics Review Group (Faculty of Humanities and Social Sciences and Faculty of the Professions) has approved the above project. Please refer to the following approval sheet for further details and conditions that may apply to this approval.

Ethics approval is granted for a period of three years subject to satisfactory annual progress reporting. The ethics expiry date for this project is **30 April 2015**. Ethics approval may be extended subject to submission of a satisfactory ethics renewal report prior to the project approval expiry date.

Participants in the study are to be given a copy of the Information Sheet and the signed Consent Form to retain. Please note that any changes to the project which might affect its continued ethical acceptability will invalidate the project's approval and an amended protocol must be submitted to the committee for approval.

It is also a condition of approval that you **immediately report** anything which might warrant review of ethical approval including:

- serious or unexpected adverse effects on participants
- proposed changes in the protocol; and
- unforeseen events that might affect continued ethical acceptability of the project.

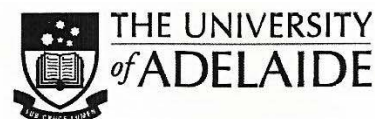
It is also a condition of approval that you advise in writing, giving reasons, if the project is discontinued before the expected date of completion.

A reporting form titled *Project Status Report* is to be used when reporting annual progress, project completion and ethics renewal and can be downloaded at <http://www.adelaide.edu.au/ethics/human/guidelines/reporting>.

Yours sincerely

ASSOCIATE PROFESSOR PAUL BABIE  
Convenor  
Low Risk Human Research Ethics Review Group (Faculty of  
Humanities and Social Sciences and Faculty of the Professions)





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Applicant: Professor G Hugo

School: Social Sciences

Application/RM No: 13213

Project Title: **Changing role of the family and ageing in Sri Lanka**

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**Low Risk Human Research Ethics Review Group (Faculty of Humanities and Social Sciences and Faculty of the Professions)**

**ETHICS APPROVAL No: HP-2012-008**

**APPROVED for the period until: 30 April 2015**

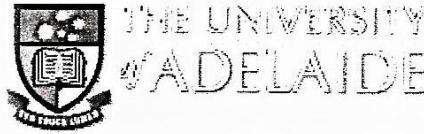
It is noted that this study is to be conducted by Ms Manori Kaluthantiri, PhD Candidate.

ASSOCIATE PROFESSOR PAUL BABIE

Convenor

Low Risk Human Research Ethics Review Group (Faculty of  
Humanities and Social Sciences and Faculty of the Professions)

## Appendix 3: Participant Information Sheet



### Participant Information Sheet

Dear Participant,

#### **Survey on the Changing role of the Family and Ageing in Sri Lanka**

I am K.D.M.S. Kaluthantiri, a student PhD at the Discipline of Geography, Environment and Population in the University of Adelaide in Australia. I am undertaking a research as part of my PhD programme. The main objective of my study is to investigate the relationship between changing role of the Family and the Ageing in Sri Lanka. It also aims at exploring the solutions to improve the wellbeing of the ageing population and to minimize the dependency burden on their families.

Since population ageing in Sri Lanka has been increasing rapidly during the past decade or so, its impact on the family and whole society will be substantial. Consequently, the family system has also experienced a notable change from extended family to more nuclear families. In this context, the role of the family has also started changing especially with the changing status of the women in the family and increasing the overall status of the women in Sri Lanka. Moreover, the capacity of present family to look after their elderly parents will be eroded with little government support in Sri Lanka. Therefore, an attempt will be made in this study to look at the impact of changing role of the family on ageing population and the changing characteristics of ageing population on families to come up with better solutions for policy formulation for a healthy and productive ageing population in future.

For this study, I will collect information from the ageing population (the population who are in the age category 60 and above) as parent generation and the adult children generation (the children those who are in age category 18-59.) As this study focuses on the changing intergenerational responsibilities especially the transfer of wealth, I need to ask a few questions on income and expenditure patterns of your family and monetary and other transfer of wealth from parents to children and children to parents. By collecting this information, it is possible to identify the key issues which policy makers have to pay more attention to as the population ages.

The interview should take 45 minutes of your time. Your valuable time and genuine ideas would help not only to complete the study but also to contribute to the body of the knowledge that the government and the others need in making decisions to improve the wellbeing of the aged and their families. All information collected at this survey will be treated as strictly confidential. Please note that you do not have to answer any questions that you do not want to.

Important points to be considered:

- Participation in this survey is completely voluntary
- The information provided by you is strictly confidential and anonymous
- Your consent will be sort if the interview is to be recorded via audio
- Results of the survey will not be analyzed and published at individual level
- If you agree to participate in the study, you will be asked to sign a consent form

Please do not hesitate to contact me and/or my supervisors Prof. Graeme Hugo and/or Dr. Dianne Rudd if you need to obtain more information about the study. Your participation in this study is greatly appreciated.

Thank you

Yours sincerely

K.D.M.S.Kaluthantiri

**Contact details**

Mrs. K.D. M.S. Kaluthantiri

Prof. Graeme Hugo

Dr.Dianne Rudd

PhD Candidate

PhD Supervisor

PhD Co- Supervisor

Dept. of Geography, Environment  
and Population

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0404621098( Australia)

## Appendix 4: Sheet of Contact for Information on Project and Independent Complain Procedure

THE UNIVERSITY OF ADELAIDE  
HUMAN RESEARCH ETHICS COMMITTEE

*Document for people who are participants in a research project*

### CONTACTS FOR INFORMATION ON PROJECT AND INDEPENDENT COMPLAINTS PROCEDURE

The Human Research Ethics Committee is obliged to monitor approved research projects. In conjunction with other forms of monitoring it is necessary to provide an independent and confidential reporting mechanism to assure quality assurance of the institutional ethics committee system. This is done by providing research participants with an additional avenue for raising concerns regarding the conduct of any research in which they are involved.

The following study has been reviewed and approved by the University of Adelaide Human Research Ethics Committee:

Project title: <b>Changing Role of the Family and Ageing in Sri Lanka</b>
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1. If you have questions or problems associated with the practical aspects of your participation in the project, or wish to raise a concern or complaint about the project, then you should consult the project co-ordinator:

***Professor Graeme Hugo***

***Phone : (08) 8303 5646***

2. If you wish to discuss with an independent person matters related to
  - making a complaint, or
  - raising concerns on the conduct of the project, or
  - the University policy on research involving human participants, or
  - your rights as a participant

contact the Human Research Ethics Committee's Secretary on phone (08) 8303 6028



Appendix 5: **Standard Consent Form for People Who Are Participants in a Research Project**

THE UNIVERSITY OF ADELAIDE HUMAN RESEARCH ETHICS COMMITTEE

**STANDARD CONSENT FORM  
FOR PEOPLE WHO ARE PARTICIPANTS IN A RESEARCH PROJECT**

1.	I, .....	(please print name)
	consent to take part in the research project entitled: <b>Changing Role of the Family and Ageing in Sri Lanka</b>	
2.	I acknowledge that I have read the attached Information Sheet entitled: .....	
3.	I have had the project, so far as it affects me, fully explained to my satisfaction by the research worker. My consent is given freely.	
4.	I understand that the interview will be taped and transcribed by the researcher afterwards. Only the researcher will have access to the tape and transcript which will be stored in a secured electronic file database and filing cabinet.	
5.	I have been given the opportunity to have a member of my family or a friend present while the project was explained to me.	
6.	I have been informed that, while information gained during the study may be published, I will not be identified and my personal results will not be revealed.	
7.	I understand that I am free to withdraw from the project at any time, now or in the future.	
8.	I am aware that I should retain a copy of this Consent Form, when completed, and the attached Information Sheet.	
	..... (signature)	..... (date)

<b>WITNESS</b>	
I have described to .....	(name of subject)
the nature of the research to be carried out. In my opinion she/he understood the explanation.	
Status in Project: .....	
Name: .....	
..... (signature)	..... (date)

Appendix 6: **Questionnaire for the Household with Age 60+ Persons** (This questionnaire was translated into *Sinhala* which is the local language of the survey respondents)



**Serial Number**

All information collected at this survey will be treated as strictly confidential. Individual information will not be released.

# **Survey of the Changing Role of the Family and Ageing Population in Sri Lanka**

**2012**

**Questionnaire for the Household with 60+ persons**  
**SURVEY OF THE CHANGING ROLE OF THE FAMILY AND AGEING IN**  
**SRI LANKA**

**Elderly Household Survey (60+)**

**Questionnaire for the elderly people (60+)**

<b>Identification particulars</b>	
District	.....
DS Division	.....
GN Division	.....
Sector (Urban/Rural).....	
Household number	.....

Date of interview

Year

Month

## Household schedule

First, I would like to know some information about the members of your household. (Include all those who normally live in this household including those who are temporarily away from home, boarders and servants)

Line No. 1	Names of those who normally live in this household 2	Relationship to the head of the household (enter Code) 3	Sex (enter Code) 4	Ethnic Group (enter Code) 5	Religion (enter Code) 6	Is this your usual place of Residence (enter Code) 7	Age as at last birth day 8	Activity For age 10 yrs and Above (enter Code) 9	Marital Status (enter Code) 10	Age at marriage 11	Level of education (enter Code) 12	Technical/ professional qualifications 13
1	2	3	4	5	6	7	8	9	10	11	12	13
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												



q3	Relationship	q4 sex	q5 Ethnicity	q6 Religion	q7 Residence	q 9 Activity	q10 Marital	q11 Education
1.	Head	1. Male	1. Sinhalese	1. Buddhist	1. Yes	1. Student	1. Married	1. No schooling .
2.	Wife or husband	2. Female	2. Tamil	2.Hindu	2. No	2. Household work	2. Living together	2. Primary education
3.	Son or daughter		3. Sri Lanka Moor	3. Islam		3. Unemployed	3. Divorced/Separated	3. Secondary education
4.	Son-in-law or daughter –in-law		4. Burgher Malay	4. Roman Catholic		4. Employed	4. Widowed	4. Passed GCE O/L
5.	Grand children		5. Malay	5. Christian		5. Unable to work	5. Never married	5. Passed GCE A/L
6.	Parents		6. Other( specify)	6. Other( specify)		6. Other	6. Married but not	6. Post Graduate up to Master
7.	Parent-in-law						in union	7. Post Graduate PhD
8.	Brother or sister							
9.	Niece/Nephew by blood							
10.	Niece/Nephew by marriage							
11.	Other relative							

Now, I would like to know some information about you and your household

## Living Arrangements

Q.2	<p>a) What is your living arrangement?</p> <p>b) Are you satisfied with your living arrangement?</p> <p>c) Why?</p>	<p>1. Living alone <input type="checkbox"/></p> <p>2. Your own home alone with your spouse <input type="checkbox"/></p> <p>3. With an adult-child in your home <input type="checkbox"/></p> <p>4. With adult child at child's residence <input type="checkbox"/></p> <p>5. Other( specify) <input type="checkbox"/></p> <p>..... <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/> (Go to Q 3)</p> <p>2. No <input type="checkbox"/></p> <p>1. Not enough facilities <input type="checkbox"/></p> <p>2. Problems with children <input type="checkbox"/></p> <p>3. Financial difficulties <input type="checkbox"/></p> <p>4. No care is taken by anyone <input type="checkbox"/></p> <p>5. No social net work <input type="checkbox"/></p> <p>6. Need to attend lots of house work <input type="checkbox"/></p> <p>7. No rest <input type="checkbox"/></p> <p>8. No emotional support <input type="checkbox"/></p> <p>9. Ill health <input type="checkbox"/></p> <p>10. Other ( specify) <input type="checkbox"/></p> <p>.....</p>
Q.3	<p>a) Are you living with your spouse?</p> <p>b) Please give the reason</p>	<p>1. Yes <input type="checkbox"/> (Go to Q. 4)</p> <p>2. No <input type="checkbox"/></p> <p>1. Widowed <input type="checkbox"/></p> <p>2. Separated <input type="checkbox"/></p> <p>3. Spouse living with a Child <input type="checkbox"/></p> <p>4. Spouse living with relatives <input type="checkbox"/></p> <p>5. Other( specify) <input type="checkbox"/></p> <p>.....</p>
Q.4	<p>a) Is this your place of usual residence?</p> <p>b) What is the reason for living here?</p> <p>c) Where is your usual place of residence?</p>	<p>1. Yes <input type="checkbox"/> (Go to Q 5)</p> <p>2. No <input type="checkbox"/></p> <p>1. On a short term social visit <input type="checkbox"/></p> <p>2. Look after grand children until they find a domestic aid <input type="checkbox"/></p> <p>3. Sickness <input type="checkbox"/></p> <p>4. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>.....</p>

	<p>d) How long have you been living here?</p> <p>e) Do you have any difficulties of living here?</p> <p>f) What are they?</p>	<p>Years</p> <p>Months</p> <p>.....</p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q 5)</p> <p>1. Not enough facilities <input type="checkbox"/></p> <p>2. Problems with children <input type="checkbox"/></p> <p>3. Financial difficulties <input type="checkbox"/></p> <p>4. No care is taken by anyone <input type="checkbox"/></p> <p>5. No social net work <input type="checkbox"/></p> <p>6. Need to attend lots of house work <input type="checkbox"/></p> <p>7. No rest <input type="checkbox"/></p> <p>8. No emotional support <input type="checkbox"/></p> <p>9. Ill health <input type="checkbox"/></p> <p>10. Other ( specify) <input type="checkbox"/></p> <p>.....</p>
Q.5	<p>a) Is your usual place of residence satisfactory?</p> <p>b) Why?</p>	<p>1. Yes <input type="checkbox"/> ( Go to Q.6)</p> <p>2. No <input type="checkbox"/></p> <p>1. Not enough facilities <input type="checkbox"/></p> <p>2. Problems with children <input type="checkbox"/></p> <p>3. Financial difficulties <input type="checkbox"/></p> <p>4. No care is taken by anyone <input type="checkbox"/></p> <p>5. No social net work <input type="checkbox"/></p> <p>6. Need to attend lots of house work <input type="checkbox"/></p> <p>7. No rest <input type="checkbox"/></p> <p>8. No emotional support <input type="checkbox"/></p> <p>9. Ill health <input type="checkbox"/></p> <p>10. Other ( specify) <input type="checkbox"/></p> <p>.....</p>
<b>Income and Expenditure</b>		
Q.6	What is your current income source?	<p>1. No income <input type="checkbox"/></p> <p>2. Pension <input type="checkbox"/></p> <p>3. Provident fund <input type="checkbox"/></p> <p>4. Savings/Bank interest <input type="checkbox"/></p> <p>5. Income from property <input type="checkbox"/></p> <p>6. Money obtain from co-reside child <input type="checkbox"/></p> <p>7. Money given by children who live independently at their own house <input type="checkbox"/></p> <p>8. Money sent by migrand child/ren <input type="checkbox"/></p> <p>9. Salary from current employment <input type="checkbox"/></p> <p>10. Assistance from relatives <input type="checkbox"/></p> <p>11. Samurdhi assistance <input type="checkbox"/></p> <p>12. Assistance from NGO <input type="checkbox"/></p> <p>13. Other( specify) <input type="checkbox"/></p> <p>.....</p>

Q.7	<p>a) Are you currently employed?</p> <p>b) What is your current occupation?</p> <p>c) What is your monthly income?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q.8)</p> <p>.....</p> <p>.....</p> <p>Rs. ....</p>
Q.8	<p>a) Were you employed earlier?</p> <p>b) What was your previous occupation?</p> <p>c) What was the monthly income?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q.9)</p> <p>.....</p> <p>Rs. ....</p>
Q.9	<p>a) Is your spouse currently employed?</p> <p>b) What is his/her occupation?</p> <p>c) What is her/his monthly income?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q.10)</p> <p>.....</p> <p>.....</p> <p>Rs. ....</p>
Q.10	<p>a) Did your spouse work earlier?</p> <p>b) What was his/her previous occupation?</p> <p>c) What was his/her monthly income?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q.11)</p> <p>.....</p> <p>.....</p> <p>Rs. . ....</p>
Q.11	<p>a) Do you/spouse have savings?</p> <p>b) What type of savings?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q.12)</p> <p>.....</p> <p>.....</p>
Q.12	<p>What is your monthly expenditure (jointly with spouse) as a percentage of your income</p>	<p>(estimate average percentages of monthly expenditure of each of the following)</p> <p>Food .....%</p> <p>Health .....%</p>

		Social activities .....%
		Other (specify) .....%
<b>Information on Health</b>		
Q.13	<p>a) How would you describe your health?</p> <p>b) Are you suffering from a particular illness/s?</p> <p>c) What are they?</p> <p>d) How long are you suffering from this particular illness?</p> <p>e) Do you take regular treatment outside the home?</p> <p>f) Who takes you for treatment?</p> <p>g) Who take care of your health issues at home?</p> <p>h) Do you need ADL Support?</p>	<p>1. Excellent <input type="checkbox"/></p> <p>2. Good <input type="checkbox"/></p> <p>3. Poor <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q. 14)</p> <p>1. Diabetes <input type="checkbox"/></p> <p>2. Heart Disease <input type="checkbox"/></p> <p>3. High/Low Pressure <input type="checkbox"/></p> <p>4. Wheeze/Short of breath <input type="checkbox"/></p> <p>5. Paining in joints/Difficulty in body movements <input type="checkbox"/></p> <p>6. Fractures in limbs <input type="checkbox"/></p> <p>7. Mental Illness/Disability <input type="checkbox"/></p> <p>8. Cancer <input type="checkbox"/></p> <p>9. Other( Specify) <input type="checkbox"/></p> <p>..... <input type="checkbox"/></p> <p>.....</p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> ( Go to Q.14)</p> <p>1. Yourself <input type="checkbox"/></p> <p>2. Spouse <input type="checkbox"/></p> <p>3. Children <input type="checkbox"/></p> <p>4. Others( specify) <input type="checkbox"/></p> <p>.....</p> <p>1. Son/daughter <input type="checkbox"/></p> <p>2. Son in law/Daughter in law <input type="checkbox"/></p> <p>3. Spouse <input type="checkbox"/></p> <p>4. Domestic aid <input type="checkbox"/></p> <p>5. Relatives(specify) <input type="checkbox"/></p> <p>6. Other(Specify) <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p>



	<p>b) What is the main organisation?</p> <p>.....</p> <p>.....</p> <p>c) Do you hold any position in the organisation?</p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q.18)</p> <p>d) What is the position?</p> <p>1. Secretary <input type="checkbox"/></p> <p>2. Chairperson <input type="checkbox"/></p> <p>3. Treasurer <input type="checkbox"/></p> <p>4. Other( Specify) <input type="checkbox"/></p> <p>.....</p> <p>5. No Official status <input type="checkbox"/></p> <p>e) What benefit you obtain from this organisation?</p> <p>1. Financial <input type="checkbox"/></p> <p>2. Moral satisfaction <input type="checkbox"/></p> <p>3. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>f) If you are not attending a voluntary organisations, give reasons</p> <p>1. Not enough time <input type="checkbox"/></p> <p>2. Do not like social activities <input type="checkbox"/></p> <p>3. Sickness <input type="checkbox"/></p> <p>4. Like to be alone <input type="checkbox"/></p> <p>5. Other( specify) <input type="checkbox"/></p> <p>.....</p>	
<b>Information on Leisure</b>		
Q.18	<p>a) What type of activity do you usually do at home?</p> <p>1. Cooking <input type="checkbox"/></p> <p>2. Cleaning <input type="checkbox"/></p> <p>3. Shopping <input type="checkbox"/></p> <p>4. Taking care of grand children <input type="checkbox"/></p> <p>5. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>b) What do you think of participating in household activities?</p> <p>1. Extremely happy <input type="checkbox"/></p> <p>2. Happy <input type="checkbox"/></p> <p>3. Not Happy <input type="checkbox"/></p> <p>4. Extremely unhappy <input type="checkbox"/></p> <p>c) Why?</p> <p>.....</p>	
Q.19	<p>How do you spend your leisure time?</p> <p>1. Watching T.V. <input type="checkbox"/></p> <p>2. Reading news papers <input type="checkbox"/></p> <p>3. Visiting neighbors <input type="checkbox"/></p> <p>4. Actively involved with social work <input type="checkbox"/></p> <p>5. Go to temple/church/kovil/mosque <input type="checkbox"/></p> <p>6. Other( specify) <input type="checkbox"/></p> <p>.....</p>	

Family and Society			
Q.20	Who is most likely to make decision in family matters?	1. Yourself 2. Spouse 3. Children 4. Other (Specify)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Q.21	a) Do you feel that your children respect you?  b) Why?	1. Yes <input type="checkbox"/> (Go to Q. 22) 2. No <input type="checkbox"/>  1. Do not consult for any family decision 2. Do not like to get advice 3. Do not frequently communicate 4. Ignoring 5. Other( specify)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Q.22	a) Do you feel that society respects the aged? b) Please give reasons	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>  ..... ..... .....	
Q.23	Do you think that your parents/grandparents were more respected by family?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
Knowledge on Welfare Activities and Welfare Facilities			
Q.24	a) Could you tell me any social protection schemes provided by the government for elders?  b) Do you have any of the above facilities?  c) What are they?	1. Pension schemes 2. Provident fund 3. Samurdhi 4. Pin padi( Charity allowance) 5. Other( specify)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		.....  1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> (Go to Q.25)  1. Pension schemes 2. Provident fund 3. Samurdhi 4. Pin padi 5. Other( specify)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Q.25	a) Do you have an Elders' Identity card provided by the Government?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> (Go to Q.26)	



	<p>b) Do you find it useful?</p> <p>c) Why?</p> <p>d) How would the ID card useful?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>1. Applied and waiting <input type="checkbox"/></p> <p>2. Not applied for <input type="checkbox"/></p> <p>3. Do not know about it <input type="checkbox"/></p> <p>4. Other ( specify) <input type="checkbox"/></p> <p>.....</p> <p>1. For security reasons <input type="checkbox"/></p> <p>2. For health care from public hospital <input type="checkbox"/></p> <p>3. To obtain assistance from public officers <input type="checkbox"/></p> <p>4. To obtain more interest from the savings <input type="checkbox"/></p> <p>5. To obtain assistance from charity organisations <input type="checkbox"/></p> <p>6. Others( Specify) <input type="checkbox"/></p> <p>.....</p>
Q.26	Do you know about the 'elders magazine' circulated by the Department of Social services?	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p>
Q.27	Please state any other facilities provided by the government or any other organisations for elders?	<p>.....</p> <p>.....</p> <p>.....</p>
<b>General Opinion of Elders</b>		
Q.28	In your opinion, what are the three main requirements to have a happy life in old age?	<p>.....</p> <p>.....</p> <p>.....</p>
Q.29	What would you propose to improve health and well-being of the elderly?	<p>.....</p> <p>.....</p> <p>.....</p>
Q.30	a) Did you have any specific plan to spend your older age before reaching to the older age?	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> ( Go to Q.31)</p>

	b) Explain your plan	<p>.....</p> <p>.....</p> <p>.....</p>
Q.31	a) Do you think that the services provided by the government for elderly are adequate? b) Explain your answer	1. yes <input type="checkbox"/> 2. No <input type="checkbox"/> <p>.....</p> <p>.....</p> <p>.....</p>
Q.32	Please give your suggestions to improve the living standards of elderly by the government?	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>

### Changing role of the Family

Q.33	a) Do you see any difference between your present family and your previous family (Main family before your own marriage)?  b) What is the difference?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ( Go to Q. 35)  1. Family type <input type="checkbox"/> 2. Size of the family <input type="checkbox"/> 3. Relationship between parents and children <input type="checkbox"/> 4. Relationship among children <input type="checkbox"/> 5. Status of the women in the family <input type="checkbox"/> 6. Type of economy of the family <input type="checkbox"/> 7. Education level of parents <input type="checkbox"/> 8. Education level of children <input type="checkbox"/> 9. Other( Specify) <input type="checkbox"/> <p>.....</p>
Q.34	a) Do you think that the role of the present family has significantly changed from the traditional family	1. Totally changed <input type="checkbox"/> 2. Changed <input type="checkbox"/> 3. Somewhat changed <input type="checkbox"/> 4. No changed <input type="checkbox"/> 5. No change at all <input type="checkbox"/>

	<p>existed in Sri Lanka?</p> <p>b) According to your knowledge what was the major reason for family change in Sri Lanka?</p>	<ol style="list-style-type: none"> <li>1. Changing status of the women in the family <input type="checkbox"/></li> <li>2. Improved education of the children including women's education <input type="checkbox"/></li> <li>3. Higher female labourforce participation <input type="checkbox"/></li> <li>4. More and more engaged in formal sector employment in both public and private sector establishments <input type="checkbox"/></li> <li>5. Diminishing family economies <input type="checkbox"/></li> <li>6. Adult married children establishing separate homes <input type="checkbox"/></li> <li>7. Increased rural urban migration <input type="checkbox"/></li> <li>8. Increased female international labour migration <input type="checkbox"/></li> <li>9. Increased family migration <input type="checkbox"/></li> <li>10. Other( specify) <input type="checkbox"/></li> </ol> <p>.....</p>
	<p>c) Do you think that the changing role of the family has made an impact on well-neing of elderly people?</p>	<ol style="list-style-type: none"> <li>1. Yes <input type="checkbox"/></li> <li>2. No <input type="checkbox"/> ( Go to Q.36)</li> </ol>
Q.35	<p>a) Do you think that there is a wide gap (in all aspects) between your generation and your children generation?</p> <p>b) Please explain your answer.</p>	<ol style="list-style-type: none"> <li>1. Yes <input type="checkbox"/></li> <li>2. No <input type="checkbox"/></li> </ol> <p>.....</p> <p>.....</p> <p>.....</p>

Q. 36 please give your opinion on the following statements, circling the relevant code number.

	Statement	Totally agree	Agree	Agree somewhat	Disagree	Totally disagree
1	My parents benefited having many children	1	2	3	4	5
2	Today prefer one or two children	1	2	3	4	5
3	Those days children contributed to the household/family income	1	2	3	4	5
4	Today parents are concerned with the quality of the child	1	2	3	4	5
5	Today Parents prefer small families because of economic constraints	1	2	3	4	5
6	Today, unlike those days, it is costly to bring up a child	1	2	3	4	5

## Information on Children

Q.37 Number of children ever born? .....

Q.38 Number of children dead? .....

Q. 39 Please give me following information about your children

Line No.	Order of the children 1	Name of the Children 2	Age 3	Sex 4	Educational attainment 5	Marital Status 6	Age at marriage 7	Whether living with parents 8	Whether living with parent in laws 9	Whether living Overseas 10	Whether living in a different district in the country 11
1	1 <sup>st</sup> Child										
2	2 <sup>nd</sup> Child										
3	3 <sup>rd</sup> Child										
4	4 <sup>th</sup> Child										

- |          |                                |                       |        |        |        |        |
|----------|--------------------------------|-----------------------|--------|--------|--------|--------|
| 1 Male   | 1. No schooling                | 1. Married            | 1. Yes | 1. Yes | 1. Yes | 1. Yes |
| 2 Female | 2. Primary education           | 2. Living together    | 2. No  | 2. No  | 2. No  | 2. No  |
|          | 3. Secondary education         | 3. Divorced/separated |        |        |        |        |
|          | 4. Passed GCE O/L              | 4. Widowed            |        |        |        |        |
|          | 5. Passed GCE A/L              | 5. Never married      |        |        |        |        |
|          | 6. Post graduate up to masters | 6. Other( specify)    |        |        |        |        |
|          | 7. Post graduate up to PhD     |                       |        |        |        |        |
|          | 8. Other( specify)             |                       |        |        |        |        |

Q. 40 Ask the following questions, if the respondents' children have moved elsewhere in Sri Lanka.

Line No.	Child's' Name 1	District of Destination 2	Purpose of Migration 3	Whether whole family has migrated( enter the code) 4
1				
2				

4

1. Yes
2. No

Q. 41 Ask following questions if the respondent's children living in Overseas

Child's Name 1	Country of Destination 2	Purpose of migration 3	Whether whole family has migrated 4

4

1. Yes
2. No

Intergenerational transfer/supportive system			
Q.42	How long your children have been dependent on you?	1. Until they become adult 2. Until they find employment 3. They are still dependent 4. Other(Specify)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		.....	
Q.43	How did you help children until they become adults?	1. Financially 2. Materially 3. Emotionally 4. Other(specify)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		.....	
Q.44	For what educational level did you take care of the finances of your children's education?	1. Primary 2. Secondary 3. Tertiary 4. Other( specify)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		.....	
Q.45	What did you expect from your children through your help?	1. Success in education 2. Finding a good employment 3. Good marriage 4. Other( specify)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		.....	
Q.46	Did you achieve those expectations?	1. Yes <input type="checkbox"/> ( Go to Q. 48) 2. No <input type="checkbox"/>	
Give reasons		.....	
		.....	
Q.47	Did you expect any returns by doing this?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
Q.48	Are you satisfied with the return you receive(d) from your children?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
Q.49	Are all of your children economically independent?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	

Q.50	<p>a) Do you financially support the economically not independent children?</p> <p>b) How?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> ( Go to Q.51)</p> <p>.....</p>
Q.51	<p>a) How do the financially independent children help you?</p> <p>b) How much money you give per child per month, on average?</p> <p>c) How much money you receive from child/ren per month, on average?</p> <p>d) What are the other material support you receive? (other than cash)</p>	<p>1. Financially <input type="checkbox"/></p> <p>2. Providing food and clothes <input type="checkbox"/></p> <p>3. Giving moral support <input type="checkbox"/></p> <p>4. Helping for daily needs <input type="checkbox"/></p> <p>5. Help when get sick <input type="checkbox"/></p> <p>6. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>Rs. ....</p> <p>Rs. ....</p> <p>.....</p> <p>.....</p> <p>.....</p>
Q.52	<p>a) What support you received from your children live elsewhere?</p> <p>b) How much money you receive from child/ren per month, on average?</p> <p>c) Please explain the help (other than cash) you receive from children live elsewhere?</p> <p>d) What support you extent to your children live elsewhere?</p>	<p>1. Financially <input type="checkbox"/></p> <p>2. Providing food and clothes <input type="checkbox"/></p> <p>3. Giving moral support <input type="checkbox"/></p> <p>4. Helping for daily needs <input type="checkbox"/></p> <p>5. Help when get sick <input type="checkbox"/></p> <p>6. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>Rs. ....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>1. Financially <input type="checkbox"/></p> <p>2. Providing food and clothes <input type="checkbox"/></p> <p>3. Giving moral support <input type="checkbox"/></p> <p>4. Helping for daily needs <input type="checkbox"/></p> <p>5. Help when get sick <input type="checkbox"/></p> <p>6. Other( specify) <input type="checkbox"/></p> <p>.....</p>

	<p>e) How much money you give per child/ren per month, on average?</p> <p>f) Please explain help (other than cash)you extend to children live elsewhere?</p>	<p>Rs. ....</p> <p>.....</p> <p>.....</p> <p>.....</p>
Q.53	<p>a) If you co-reside with a child, which child is co-residing with you at your own home? ( 1<sup>st</sup>.2<sup>nd</sup>.....and last etc.)</p> <p>b) What support you receive from your co-reside child?</p> <p>c) How much money you receive from co-reside child/ren per month, on average?</p> <p>d) Please explain the help ( other than cash)you receive from co-reside child/ren ?</p> <p>e) What support you extend to your co-reside child/ren?</p> <p>f) How much money you give per child per month, on average?</p> <p>g) Please explain the help (other than cash) you extend to co-reside child/ren?</p>	<p>.....</p> <p>.....</p> <p>1. Financially <input type="checkbox"/></p> <p>2. Providing food and clothes <input type="checkbox"/></p> <p>3. Giving moral support <input type="checkbox"/></p> <p>4. Helping for daily needs <input type="checkbox"/></p> <p>5. Help when get sick <input type="checkbox"/></p> <p>6. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>Rs. ....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>1. Financially <input type="checkbox"/></p> <p>2. Materially <input type="checkbox"/></p> <p>3. Caring for grand children <input type="checkbox"/></p> <p>4. Emotionally <input type="checkbox"/></p> <p>5. Helping daily needs <input type="checkbox"/></p> <p>6. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>Rs. ....</p> <p>.....</p> <p>.....</p>
Q.54	<p>Why did you allow a child to live with you at your residence?</p>	<p>1. House will be owned after us <input type="checkbox"/></p> <p>2. Until the child is financialy settled <input type="checkbox"/></p> <p>3. Like to live with a child <input type="checkbox"/></p> <p>4. Child to look after us whenever we need help <input type="checkbox"/></p> <p>5. Other( Specify) <input type="checkbox"/></p> <p>.....</p>

Q.55	If you are living with child's house, why did you decide to live with your child at his/her residence?	1. Do not have a permanent residence <input type="checkbox"/> 2. Have spent all savings for their education <input type="checkbox"/> 3. Need children's support <input type="checkbox"/> 4. Not in good health <input type="checkbox"/> 5. Other( specify) <input type="checkbox"/> .....
Q.56	What type of help you expect from your adult children who live with you?	1. Financially <input type="checkbox"/> 2. Foods and clothes <input type="checkbox"/> 3. Moral support <input type="checkbox"/> 4. Helping for daily needs <input type="checkbox"/> 5. Help when get sick <input type="checkbox"/> 6. Other( specify) <input type="checkbox"/> .....
Q.57	Do you have any preference for your children in terms of the support rendered to you by them?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>
Q.58	Why do you have preferences for certain children in terms of the support rendered to you by them?	..... ..... .....
Q.59	a) Who are the people other than your children help you at your old age?      b) How do they help you?	1. Relatives <input type="checkbox"/> 2. Neighbours <input type="checkbox"/> 3. House maid <input type="checkbox"/> 4. NGO/Charity Organizations <input type="checkbox"/> 5. Other( specify) <input type="checkbox"/> .....  1. Financially <input type="checkbox"/> 2. Providing food and clothes <input type="checkbox"/> 3. Giving moral support <input type="checkbox"/> 4. Helping for daily needs <input type="checkbox"/> 5. Help when get sick <input type="checkbox"/> 6. Other( specify) <input type="checkbox"/> .....
Q.60	Are you being looked after by a domestic aid provided by your child(ren)?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>
Q.61	a) Do your children help each other members of the family?   b) How do your children help each other for the members of the family?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>  1. Financially <input type="checkbox"/> 2. Providing food and clothes <input type="checkbox"/> 3. Giving moral support <input type="checkbox"/> 4. Helping for daily needs <input type="checkbox"/> 5. Help when get sick <input type="checkbox"/> 6. Other( specify) <input type="checkbox"/> .....



Q.62	<p>a) Is this your first marriage?</p> <p>b) What was the reason for dissolution of the previous marriage?</p> <p>c) How many children do you have from your previous marriage?</p>	<p>1. Yes <input type="checkbox"/> (Go to Q65)</p> <p>2. No <input type="checkbox"/></p> <p>.....</p> <p>.....</p>
Q.63	<p>a) How do you help your children of your first marriage?</p> <p>b) How do the children of your first marriage help you?</p>	<p>1. Financially <input type="checkbox"/></p> <p>2. Morally <input type="checkbox"/></p> <p>3. Other( Specify) <input type="checkbox"/></p> <p>.....</p> <p>1. Financially <input type="checkbox"/></p> <p>2. Providing food and clothes <input type="checkbox"/></p> <p>3. Giving moral support <input type="checkbox"/></p> <p>4. Helping for daily needs <input type="checkbox"/></p> <p>5. Help when get sick <input type="checkbox"/></p> <p>6. Other( specify) <input type="checkbox"/></p> <p>.....</p>
Q.64	<p>a) Do you receive any financial support from your migrant children?( International)</p> <p>b) Does your child have left her/his family in Sri Lanka?</p> <p>c) Do you extend your support to the family of migrant children?</p> <p>d) How?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> (Go to Q.67)</p> <p>.....</p> <p>.....</p>
Q.65	<p>a) Do you receive any financial support from your migrant children? ( Internal)</p> <p>b) Do you extend your support to the family of internal migrant children?</p> <p>c) How?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>.....</p> <p>.....</p>
Q.66	<p>a) Do you have any handicapped children?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p>

	<p>b) How do the handicapped children support you?</p> <p>c) How do you support your handicapped children?</p>	<p>1. Financially <input type="checkbox"/></p> <p>2. Providing food and clothes <input type="checkbox"/></p> <p>3. Giving moral support <input type="checkbox"/></p> <p>4. Helping for daily needs <input type="checkbox"/></p> <p>5. Help when get sick <input type="checkbox"/></p> <p>6. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>1. Financially <input type="checkbox"/></p> <p>2. Morally <input type="checkbox"/></p> <p>3. Helping for their daily requirements <input type="checkbox"/></p> <p>4. Other( Specify) <input type="checkbox"/></p> <p>.....</p>
Q.67	Are you or your children estranged as a result of conflict?	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p>
Q.68	<p>a) Did you distribute any property among your children?</p> <p>b) Did you have any preference when distributing your property?</p> <p>c) Why did you have such preference?</p> <p>d) Is there any impact of the distribution of property among your children on your old age?</p> <p>e) Explain how?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>1. Wanted him/her to live with us in the same house <input type="checkbox"/></p> <p>2. Wanted him/her to take care of us <input type="checkbox"/></p> <p>3. Other( specify) <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>.....</p>
Q.69	<p>a) Do you have any adult grand children?</p> <p>b) Do you receive any support from them?</p> <p>c) What kind of support you receive from them?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/></p> <p>1. Financially <input type="checkbox"/></p> <p>2. Morally <input type="checkbox"/></p> <p>3. Providing food and clothes <input type="checkbox"/></p> <p>4. Giving moral support <input type="checkbox"/></p> <p>5. Helping for daily needs <input type="checkbox"/></p> <p>6. Help when get sick <input type="checkbox"/></p> <p>7. Other( specify) <input type="checkbox"/></p> <p>.....</p>

	d) What kind of support you extend to your adult grand children?	a. Financially <input type="checkbox"/> b. Morally <input type="checkbox"/> c. Care for great grand children <input type="checkbox"/> d. Other( Specify) <input type="checkbox"/> .....
Q.70	What is your opinion about present supportive system from elderly parents to adult children?	..... ..... ..... .....
Q.71	What is your opinion about present supportive system from Adult children to Elderly parents?	..... ..... ..... .....

Appendix 7: **Questionnaire for the Household Without Elderly People (No elderly Household Ages between 18-59)** (This questionnaire was translated into *Sinhala* which is the local language of the survey respondents)



**Serial Number**

All information collected at this survey will be treated as strictly confidential. Individual information will not be released.

# **Survey of the Changing Role of the Family and Ageing Population in Sri Lanka**

**2012**

**Questionnaire for the Households without Elderly People (No Elderly People) Adult children's households ages between 18-59**

**SURVEY OF THE CHANGING ROLE OF THE FAMILY AND AGEING  
IN SRI LANKA**

**Interviewing households without Elderly People**

**Questionnaire for the Adult Children**

<b>Identification particulars</b>		
District	.....	
DS Division	.....	
GN Division	.....	
Sector (Urban/Rural)	.....	
Household number	.....	

Date of interview

Year

Month

## Household schedule

First, I would like to know some information about the members of your household. (Include all those who normally live in this household including those who are temporarily away from home, boarders and servants)

Line No. 1	Names of those who normally live in this household 2	Relationship to the head of the household (enter Code) 3	Sex (enter Code) 4	Ethnic Group (enter Code) 5	Religion (enter Code) 6	Is this your usual place of Residence (enter Code) 7	Age as at last birth day 8	Activity For age 10 yrs and Above (enter Code) 9	Marital Status (enter Code) 10	Age at marriage 11	Level of education (enter Code) 12	Technical/ professional qualifications 13
1	2	3	4	5	6	7	8	9	10	11	12	13
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												

q3	Relationship	q4 sex	q5 Ethnicity	q6 Religion	q7 Residence	q 9 Activity	q10 Marital	q11 Education
1.	Head	1. Male	1. Sinhalese	1. Buddhist	1. Yes	1. Student	1. Married	1. No schooling .
2.	Wife or husband	2. Female	2. Tamil	2. Hindu	2. No	2. Household work	2. Divorced/Separated	2. Primary education
3.	Son or daughter		3. Sri Lanka Moor	3. Islam		3. Unemployed	3. Widowed	3. Secondary education
4.	Son-in-law or daughter –in-law		4. Burgher Malay	4. Roman Catholic		4. Employed	4. Never married	4. Passed GCE O/L
5.	Grand children		5. Malay	5. Christian		5. Unable to work		5. Passed GCE A/L
6.	Parents		6. Other( specify)	6. Other( specify)		6. Other		6. Post Graduate up to Master
7.	Parent-in-law							7. Post Graduate PhD
8.	Brother or sister							
9.	Niece/Nephew by blood							
10.	Niece/Nephew by marriage							
11.	Other relative							

Now, I would like to know some information about you and your household		
Q.2	<p>a) Is this your usual place of residence?</p> <p>b) What is the reason for living here?</p> <p>c) How long have you been living here?</p> <p>d) Where is usual place of residence?</p>	<p>1. Yes <input type="checkbox"/> ( Go to Q.3)</p> <p>2. No <input type="checkbox"/></p> <p>1. My own land and house</p> <p>2. For employment purpose</p> <p>3. To send children to school</p> <p>4. Other(specify)</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
Q.3	<p>a) Are you currently employed?</p> <p>b) What is your occupation?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> ( Go to Q. 4)</p> <p>.....</p> <p>.....</p>
Q.4	<p>a) Is your spouse currently working?</p> <p>b) What is his/her occupation?</p>	<p>1. Yes <input type="checkbox"/></p> <p>2. No <input type="checkbox"/> ( Go to Q 5)</p> <p>.....</p> <p>.....</p>
Q.5	What is your monthly household income?	<p>Husband - Rs. ....</p> <p>Wife - Rs. ....</p>
Q.6	What is the your monthly household expenditure?	<p>1. Food - Rs. ....</p> <p>2. Health - Rs. ....</p> <p>3. Social activities - Rs. ....</p> <p>4. For Parents- Rs. ....</p> <p>5. Others( specify)</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>





	<p>b) Where do they live now?</p> <p>c) Who take care of them?</p>	<p>1. Own house alone <input type="checkbox"/></p> <p>2. Own house with spouse <input type="checkbox"/></p> <p>3. Own house with a brother/sister <input type="checkbox"/></p> <p>4. With brother in his house <input type="checkbox"/></p> <p>5. With sister in her house <input type="checkbox"/></p> <p>6. Relatives <input type="checkbox"/></p> <p>7. Elderly home <input type="checkbox"/></p> <p>8. Other( specify) <input type="checkbox"/></p> <p>.....</p> <p>1. No one, take care of them <input type="checkbox"/></p> <p>2. Take help from a domestic aid <input type="checkbox"/></p> <p>3. Brother <input type="checkbox"/></p> <p>4. Sister <input type="checkbox"/></p> <p>5. Relatives <input type="checkbox"/></p> <p>6. Elderly home <input type="checkbox"/></p> <p>7. Other( Specify) <input type="checkbox"/></p> <p>.....</p>
Q.10	Why are you not living with parents?	<p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
Q.11	<p>a) Do you think that your living in a separate house prevented from helping elderly parents?</p> <p>b) Give reasons</p>	<p>1. Yes <input type="checkbox"/> ( Go to Q 12)</p> <p>2. No <input type="checkbox"/></p> <p>.....</p> <p>.....</p>
<b>Changing Role of the Family</b>		
Q.12	<p>a) Do you notice any difference in the family structure between your present family and the family before the marriage?</p> <p>b) What are the differences?</p>	<p>1. There is a vast difference <input type="checkbox"/></p> <p>2. There is a difference <input type="checkbox"/></p> <p>3. There is somewhat difference <input type="checkbox"/></p> <p>4. No difference( Go to Q13) <input type="checkbox"/></p> <p>1. Family type has changed from extended to nuclear <input type="checkbox"/></p> <p>2. Value of the family has changed <input type="checkbox"/></p> <p>3. Relationship between family memebrrs have changed <input type="checkbox"/></p> <p>4. Role of the mother/father have changed <input type="checkbox"/></p>

		5. Overall family has changed <input type="checkbox"/> 6. Other( specify) <input type="checkbox"/> .....
Q.13	Do you think the role of the present family significantly changed from the traditional family existed in Sri Lanka?	1. Totally changed <input type="checkbox"/> 2. Changed <input type="checkbox"/> 3. Somewhat changed <input type="checkbox"/> 4. No changed <input type="checkbox"/> 5. No change at all <input type="checkbox"/>
Q.14	According to your knowledge what was the major reason for family change in Sri Lanka?	1. Changing status of the women in the family <input type="checkbox"/> 2. Improved education of the children including women'd education <input type="checkbox"/> 3. Incrtease of the female labourforce participation <input type="checkbox"/> 4. More and more enaged in formal sector establishments <input type="checkbox"/> 5. Diminishing family economies <input type="checkbox"/> 6. Adult married children establishing separate homes <input type="checkbox"/> 7. Increased urban and rural migration <input type="checkbox"/> 8. Increased female international migration <input type="checkbox"/> 9. Increased internal and international family migration <input type="checkbox"/> 10. Other(specify) <input type="checkbox"/> .....
Q.15	a) Do you think that the changing role of the family would make an impact on well-neing of elderly people? b) Give reasons	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ( Go to Q 16) ..... .....
<b>Internal Migration</b> ( for Adult children living in a separate district/ DS Division)		
Q. 16	a) Do you think that your migration to another place in Sri Lanka prevented them from helping elderly parents? b) Give reasons	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ..... .....
Q.17	a) What is the financial situation of your parents?	1. Good <input type="checkbox"/> 2. Average <input type="checkbox"/> 3. Poor <input type="checkbox"/>

	b) Do you help your parents financially?  c) Explain why	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>  .....  .....
Q.18	a) Do you send them money regularly?  b) Explain why	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>  .....  .....
Q.19	a) Do you regularly communicate with them?  b) How often?  c) Do you visit them regularly?  d) How often?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> (Go to c)  1. Frequently <input type="checkbox"/> 2. Rarely <input type="checkbox"/> 3. Not at all <input type="checkbox"/>  1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> (Go to Q.20)  1. Frequently <input type="checkbox"/> 2. Rarely <input type="checkbox"/> 3. Not at all <input type="checkbox"/>
Q.20	a) What is the current health situation of your parents?  b) Do you attend to their healthcare needs?  c) How often?  d) Give reasons	1. Good <input type="checkbox"/> 2. Poor <input type="checkbox"/>  1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> (Go to d.)  1. Frequently <input type="checkbox"/> 2. Rarely <input type="checkbox"/> 3. Not at all <input type="checkbox"/> (Go to d)  .....  .....
<b>International Migration</b> ( From respondents whose spouse has migrated overseas)		
Q. 21	a) Is your spouse currently living overseas?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ( Go to 22)

	b) What is the purpose of living overseas?  c) How long he/she has been overseas	1. Employment <input type="checkbox"/> 2. Studies <input type="checkbox"/> 3. Other (specify) <input type="checkbox"/> ..... ..... Number of Years .....
Q. 22	a) Does he/she send money regularly to you?  b) Give reasons	1. Yes <input type="checkbox"/> ( Go to Q. 23) 2. No <input type="checkbox"/> ..... .....
Q. 23	a) Does he/she support your and your spouse's parents financially?  b) Give reasons	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ..... .....
Q. 24	a) Do you think your spouse's overseas migration helped you and your spouse to support elderly parents?  b) Why (give reasons)	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ..... .....
Q. 25	a) Did he/she support elderly parents financially before migration?  b) Give reasons	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ..... .....
Q. 26	a) Did he/she support elderly parents in health care needs before migration?  b) Give reasons	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ..... .....
Q. 27	a) Did he/she have regular contact with elderly parents on their well-being before migration?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>

	b) Give reasons	<p>.....</p> <p>.....</p>	
<b>Intergenerational Transfers</b>			
<b><i>Parents to children</i></b>			
Q. 28	To what extent did your parents support your education?	1. Primary education <input type="checkbox"/> 2. Secondary education <input type="checkbox"/> 3. Tertiary education <input type="checkbox"/> 4. Other (specify) <input type="checkbox"/> .....	
Q. 29	How did your parents support your education?	1. Financially <input type="checkbox"/> 2. Morally <input type="checkbox"/> 3. Other (specify) <input type="checkbox"/> .....	
Q. 30	Did your parents help you to find employment?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>	
Q. 31	a) Did your parents support in your marriage?  b) How did they support you in your marriage?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ( Go to Q. 32)  1. Financially <input type="checkbox"/> 2. Other(specify) <input type="checkbox"/> .....	
Q. 32	a) Do your parents still support you financially?  b) Explain how?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ( Go to Q. 33)  ..... .....	
Q. 33	a) Do (did) your parents support your grandchildren?  b) How?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ( Go to Q. 34)  1. Financially <input type="checkbox"/> 2. Fetching them to school <input type="checkbox"/> 3. Feeding them <input type="checkbox"/> 4. Helping in their studies <input type="checkbox"/> 5. Other (specify) <input type="checkbox"/> .....	
Q. 34	a) Do your parents receive any financial support from the government or any other organization?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ( Go to Q. 35)	

	b) What are they?	1. Pension <input type="checkbox"/> 2. Provident Fund <input type="checkbox"/> 3. <i>Samurdhi</i> Relief <input type="checkbox"/> 4. Other (specify) <input type="checkbox"/> .....
Q. 35	a) Do you think that your parents have saved enough money for their old age?  b) Give reasons	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> (Go to b) ..... .....
<b>Children to Parents</b>		
Q. 36	a) Do you help your elderly parents financially?  b) How often?  c) Give reasons	1. Yes <input type="checkbox"/> (Go to b) 2. No <input type="checkbox"/> (Go to c)  1. Frequently <input type="checkbox"/> 2. Rarely <input type="checkbox"/> ..... .....
Q. 37	a) Do you take care of your elderly parents' health care needs?  b) How?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> (Go to Q. 38)  1. For Doctors Consultation <input type="checkbox"/> 2. Buying medicine <input type="checkbox"/> 3. Hospital bills <input type="checkbox"/> 4. Taking to the doctor/hospital <input type="checkbox"/> 5. Other ..... <input type="checkbox"/>
Q. 38	Indicate whether you provide the following items for your elderly parents?	1. Food <input type="checkbox"/> 2. Clothes <input type="checkbox"/> 3. Money for social visits <input type="checkbox"/> 4. Transport cost <input type="checkbox"/> 5. Other ..... <input type="checkbox"/>
Q. 39	a) Do you communicate with your parents regularly?  b) Explain how?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ..... .....
Q. 40	a) Do you visit your parents regularly? b) State why?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/> ..... .....
Q. 41	a) Do you have any specific plan to spend your older age?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>

	b) Explain how?	..... .....
Q. 42	a) Would you like to distribute your property among your children before you reach the age of 60?  b) Give reasons	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>  ..... .....
Q. 43	a) Do you expect your old-age security from your children?  b) How?  c) Why?	1. Yes <input type="checkbox"/> ( Go to Q. b) 2. No <input type="checkbox"/> ( Go to Q. c)  ..... .....  ..... .....
Q. 44	Give three (03) suggestions to improve the living standards of elderly people.	1..... 2..... 3.....
Q. 45	a) Do you think that you need support from your children in your older age?  b) Give reason for your answer	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>  ..... .....
Q. 46	a) Do you think that the services provided by the government for elderly are adequate?  b) Give your suggestions to improve the living standards of elderly by the Government?	1. Yes <input type="checkbox"/> 2. No <input type="checkbox"/>  ..... ..... .....



## Appendix 8: Sample Format for Focus Group Discussion

### Changing Role of the Family and Ageing in Sri Lanka

#### Focus Group Discussion

#### Elderly Home – Galle District

Location: Galle Four Gravets- Van Reeth

Date : 08/11/2012

Total No. of Elders: 75

No. of elders selected for the FGD: 12

Themes:

<ul style="list-style-type: none"><li>• Reasons for Institutionalised</li></ul>	.....
<ul style="list-style-type: none"><li>• Health</li></ul>	.....
<ul style="list-style-type: none"><li>• Activities of Daily Living</li></ul>	.....
<ul style="list-style-type: none"><li>• Support for Activities of the Daily Living</li></ul>	.....
<ul style="list-style-type: none"><li>• Involvement of social, religious cultural activities</li></ul>	
<ul style="list-style-type: none"><li>• Leisure</li></ul>	
<ul style="list-style-type: none"><li>• Welfare Activities for elders</li></ul>	
<ul style="list-style-type: none"><li>• Experiences of Family and Society</li></ul>	
<ul style="list-style-type: none"><li>• Attitudes towards changing role of the family</li></ul>	
<ul style="list-style-type: none"><li>• Reasons for family change in Sri Lanka</li></ul>	
<ul style="list-style-type: none"><li>• Impact of changing family on well-being of elderly</li></ul>	

• Intergenerational support	
• Difference between generations	
• Support receive from children/relatives	
• Support extended to Children/realtives	
• Reasons for not receiving support from the children/realtives	
• Opinion about present supportive system	
• Suggestions for improving the welfare of the older people	

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