

## Chapter 13

# Policy Responses

*... inadequate national revenue generation and collection, combined with new challenges ... arising from demographic changes and other factors, jeopardize the financing of social services and social protection systems in many countries.*

(United Nations 2002: 32)

### 13.1 The Second World Assembly on Ageing

The body of advice emerging from international forums and the work of international organizations is a vital setting for discussion of national policy responses to population aging, given that it is informed by research, substantial experience and varied perspectives. International effort has led to broad policy approaches with wide relevance. A major statement of these is the *Political Declaration of the Second World Assembly on Ageing*, formulated in Madrid in 2002 under the auspices of the United Nations (2002: 1–4). This built on work initiated 20 years earlier in Vienna at the First World Assembly on Ageing, which focused world attention on aging as a major phenomenon and drafted the first *International Plan of Action on Ageing*.

The Political Declaration set out guiding principles in 19 paragraph-length Articles. Several Articles (1, 3 and 19), of the Declaration emphasized a commitment to the development of ‘a society for all ages’ – which had been the theme for the 1999 International Year of Older Persons (ibid.: 7). The Declaration also called for “actions at all levels, including national and international levels, on three priority directions: (i) older persons and development, (ii) advancing health and well-being into old age, and (iii) ensuring enabling and supportive environments” (ibid.: 1):

The priority directions are designed to guide policy formulation and implementation towards the specific goal of successful adjustment to an ageing world, in which success is measured in terms of social development, the improvement for older persons in quality of life and in the sustainability of the various systems, formal and informal, that underpin the quality of well-being throughout the life course. (ibid.: 8).

The Articles of the Political Declaration elaborated on these priorities. The content of many of the Articles overlapped with that of several others and covered a broad agenda, among which the most prominent are outlined below. While headings are used here for summary purposes, they were absent from the Political Declaration. Also, the Declaration evidently avoided ambiguity and controversy about the meaning of summary concepts by making no specific reference to any, apart from 'quality of life'.

1. *Social Integration*. Eliminate age discrimination and neglect, promote increased opportunities for older persons to remain independent, realize their potential and participate fully in all aspects of life (Articles 2, 5, 6, 12 and 14). While the Declaration did not mention 'social integration', the ideas here relate to this important concept in social gerontology.
2. *Health*. Seek to achieve realization of the right to enjoyment of the highest standard of physical and mental health. This requires action in other social and economic sectors besides the health sector, as well as policies concerned with care and treatment, supportive environments and promotion of healthy lifestyles (Articles 5, 6 and 14).
3. *Productivity*. The Declaration emphasized the great potential contribution of older people to future development. It stated that they should have the opportunity to work for as long as they wish and are able to, in satisfying and productive work, continuing to have access to education and training programmes. The Declaration also recognized their important role as caregivers (Articles 10, 12 and 14).
4. *Quality of life*. "Concerted action is required to transform the opportunities and the quality of life of men and women as they age and to ensure the sustainability of their support systems." A gender perspective is needed in all policies and programmes as well as particular concern for the vulnerable aged generally and for those in insecure or life-threatening situations (Articles 5, 6, 8, 9 and 12).
5. *Social and economic development*. Aging needs to be included in development agendas, in strategies to eradicate poverty and in efforts to achieve full participation in the global economy of all developing countries (Articles 5, 7, 8 and 10). Vital in developing countries is concern for social and economic development to alleviate hardship among the aged and the population generally.
6. *Implementation*. Governments bear primary responsibility for leadership on aging matters and for ensuring access to basic social services. Progress in the priority directions requires research to assist in the formulation of policies and calls for intergenerational solidarity, together with support for families, volunteers, communities, organizations, corporations, workers, educational and religious institutions and the media. The roles of the United Nations and international co-operation are also vital (Articles 4, 6, 11, 13, 15, 16, 17 and 18). The range in the types of support regarded as necessary to the implementation of policies highlights the importance of action at different levels within societies.

Although the above summary is not exhaustive, it illustrates that there were major common concerns ranging across the 19 Articles. The policy principles endorsed at

the Second World Assembly on Ageing reflect many ideas from academic research and national policies. Important features of the Political Declaration are the emphasis on quality of life and social and economic development, placing the needs of aged women, as well as men, in developing countries prominently on the international agenda. Policies to address the welfare needs of the aged in developing countries confront by far the greatest obstacles because of widespread poverty and the impact of migration and urbanization, which have separated relatives and weakened traditional support systems.

## 13.2 The Madrid International Plan of Action

The Political Declaration's Articles and three priority directions provided the framework for the Madrid conference's second major policy document: *The Madrid International Plan of Action, 2002* (United Nations 2002: 5ff.). This set out recommendations for action together with strategies for implementation and follow-up. Summary concepts were again largely absent from this document, apart from quality of life and aging in place (see *ibid.*: 32 and 34). The document lists 239 recommendations for action to guide policy making and program development. These were arranged under the headings of the three priority directions stated in the Political Declaration (Box 13.1). The Plan of Action was intended to be "a practical tool to assist policy makers to focus on the key priorities associated with the consequences of individual and population aging" (*ibid.*: 7). It also provides direction and standards for groups and organizations seeking to promote the welfare of older people and timely adjustment to demographic and social changes. A substantial number of the suggested actions are especially relevant to developing countries.

### **Box 13.1** Overview of the Madrid International Plan of Action on Ageing, 2002

#### **Older Persons and Development**

1. *Active participation in society and development.* Enable older persons to participate actively in society and continue contributing to it, e.g. through preventing discrimination and recognizing roles in care of family, productive subsistence work and voluntary activities and enabling their participation in decision making. Create an enabling environment for volunteering at all ages and promote civic and cultural empowerment.
2. *Work and the ageing labour force.* Enable older persons to continue income generating work as long as they want and can do so productively. Reduce incentives for early retirement and disincentives for working longer.

(continued)

**Box 13.1** (continued)

3. *Rural development, migration and urbanization.* Ageing is marked in rural areas of developing countries due to an exodus of young adults, leaving older persons without traditional family support. The urban setting is less conducive to sustaining traditional family support networks. Rural and urban aged need improved living conditions and support.
4. *Access to knowledge, education and training:* to ensure productivity and employment of older persons and utilization of their potential and expertise.
5. *Intergenerational solidarity,* e.g. promote understanding of ageing through public education, and mutual support between generations as a key element for social development.
6. *Eradication of poverty, with particular attention to the needs of women and the disabled,* e.g. through enhanced international cooperation.
7. *Income security, social protection/social security and poverty prevention,* e.g. place pension systems on a sound financial footing, implement policies ensuring adequate economic and social protection during old age.
8. *Emergency situations,* e.g. equal access of older persons to care during and after natural disasters and other humanitarian emergencies.

**Advancing Health and Well-Being into Old Age**

1. *Health promotion and well-being throughout life,* e.g. through poverty eradication, addressing environmental and other risk factors, taking action to reduce smoking and alcohol abuse, promoting healthy lifestyles and social and civic participation of older people, achieving access to clean water, adequate nutrition and affordable dental services.
2. *Universal and equal access to health care services,* e.g. promoting access for people who are poor or in rural or remote areas, strengthening primary health care and long-term care services.
3. *Older persons and HIV/AIDS.* Improve support for older people with HIV/AIDS or who are caregivers for infected or surviving family members.
4. *Training of care providers and health professionals,* e.g. expand educational training in geriatrics and gerontology and provide informal caregivers with access to information and basic training.
5. *Mental health needs of older persons,* e.g. develop national and local strategies to improve prevention, treatment and training, as well as long-term care and respite care.
6. *Older persons and disabilities.* Develop national and local policies and programmes for the treatment and prevention of disabilities, e.g. housing options that facilitate independence, encourage provision of rehabilitation and integration into society of older persons with disabilities.

(continued)

**Box 13.1** (continued)**Ensuring Enabling and Supportive Environments**

1. *Housing and the living environment* – important to health and well-being. Promote ageing in place e.g. through initiatives in relation to integration of the aged and suitable, affordable housing; improve access to affordable transportation.
2. *Care and support for caregivers* – most care is informal, even in countries with well-developed formal care policies. Policy objectives of community care and ageing in place can overburden family caregivers if community care is under-resourced. A continuum of affordable care options is desirable, together with support for the care giving role of older persons, particularly older women, e.g. through respite services.
3. *Neglect, abuse and violence*. Work to prevent abuse, consumer fraud and crimes against older persons. Women are especially disadvantaged because of lack of access to economic resources, lack of education and minimal participation in decision making. Take action through education and legislation.
4. *Images of ageing*. Promote a positive view of ageing, opposing the portrayal of older persons as a drain on the economy with escalating needs for health and support services, e.g. through enhancement of public recognition of the contributions of older persons.

Source: United Nations (2002: 9ff).

Kofi Annan, the then Secretary-General of the United Nations, summarized the overriding objectives of the Plan of Action as follows:

We need to recognize that, as more people are better educated, live longer and stay healthy longer, older persons can and do make greater contributions to society than ever before. By promoting their active participation in society and development, we can ensure that their invaluable gifts and experience are put to good use. Older persons who can work and want to should have the opportunity to do so; and all people should have the opportunity to continue learning throughout life.

By creating support networks and enabling environments, we can engage the wider community in strengthening solidarity between generations and in combating abuse, violence, disrespect and discrimination against older people.

By providing adequate and affordable health care, including preventive health measures, we can help older people maintain their independence for as long as possible. (United Nations 2002: 67).

The wide scope of the Plan of Action ensures its general relevance to both developed and developing countries. Yet the emphasis governments and organizations give to particular aspects will inevitably vary between countries because of different national situations related, for instance, to economic development, historical traditions, social diversity and the level of population aging. Thus some concerns raised in the Plan of Action – such as rural development, disaster relief, HIV/AIDS and access to

clean water – are scarcely mentioned in policy agenda’s for the aged in developed countries where priorities are usually less dire and basic. This raises the question of whether it is possible to do justice to identifying all priorities and major policy objectives in a single global agenda which must give due regard to national diversity and political differences on particular issues.

In the deliberations of the Madrid Assembly there was little emphasis on the need for early interventions and proactive planning to prevent difficulties from cumulating. Both are important, for example, in ensuring the sustainability of health care systems and income maintenance for the aged, as well as in addressing demographic concerns. As noted earlier, there was also minimal reference to the concepts, reviewed in Chap. 12, that are prominent in other international policy agendas and in the goals of national governments – even though they relate closely to different aspects of the Political Declaration and the Plan of Action. Similarly, approaches to economic policies for aging societies were not discussed in any detail. Instead there was a more general emphasis on the need for economic development and eradication of poverty in developing countries. The OECD has given greater attention to economic policies, especially those most relevant to its member countries.

At the Madrid Assembly, the NGOs’ main criticism of the Plan of Action referred to a lack of “a strong follow-up and effective monitoring process” (Kirakosyan 2002). Nevertheless, the Plan of Action included a section on this (United Nations 2002: 39–42) and the Social Integration Branch of the United Nations Department of Economic and Social Affairs has assumed responsibility for overseeing implementation (Social Integration Branch 2011). Since the Assembly, United Nations organizations have convened a number of regional conferences focussing on the implementation of the Plan of Action (see Chap. 15). Also, in 2008, the U.N.’s Department of Economic and Social Affairs (UNDESA 2008) published a *Guide to the National Implementation of the Madrid International Plan of Action on Ageing* (see Chap. 15).

### 13.3 Population Policy

A conspicuous absence from the deliberations at Madrid was any attempt to address the question of modifying the course of national demographic trends. Even with conscientious efforts to implement the Plan of Action, in many countries the long-term sustainability of policies depends on restraining rapid population growth, or rapid population decline, and keeping the level of aging within bounds. By their nature the demographic forces involved in population aging and population growth are long-term and cumulative. The means of responding to them need to be proactive and sustained. Moreover, the characteristics of the new demography have heightened the consequences of demographic change beyond previous expectations, necessitating far-reaching adjustments. Internationally, the most serious consequences of population aging will not become conspicuous until the 2020s, but by then it will be too late to initiate gradual adaptations. Some major initiatives, including restructuring

of pension and health care systems, must anticipate future developments well in advance to enable an undisruptive changeover to new arrangements:

Over the coming decades, the decisive shift to an older age structure in Europe will challenge social security and health systems, may hinder productivity gains, and could affect global competitiveness and economic growth. It could also strain relations among generations, particularly between those who are on the contributing and receiving ends of public transfer programs. It may also diminish social cohesion, particularly if increasing labor demand leads to substantial immigration from other cultures. (Lutz et al. 2004: 306).

Foresight is possible in policy making for aging societies to the extent that demographic changes are more predictable for older groups than for younger ones, and population projections and statistical models permit the analysis of future scenarios and potential policy options. Exploration of policy alternatives is important because strategies that are efficient and beneficial in one context may become wasteful and burdensome in another. The best-known example is that the viability of the earliest pension schemes depended substantially on the fact that only a small proportion of people lived to the pensionable age and even fewer lived long thereafter. Today, rising life expectancies and longer life in receipt of a pension are compelling more governments to consider means testing of pensions, higher ages of eligibility and alternatives to the taxation system as the funding source for retirement incomes. In the current period of ongoing change, policy reform needs to be a continuing process.

Although the Madrid Political Declaration referred to the need for sustainable social support, the statement did not mention 'sustainable development', nor did it refer to demographic aspects of sustainability. These have been subjects of other forums, including the World Population Conferences held in 1974 (Bucharest), 1984 (Mexico) and 1994 (Cairo), but demographic objectives have remained controversial in international policy debate. The nature of equitable and sustainable rates of fertility and population growth, so important in restraining expansion in the percentages and numbers of older people, remain matters of judgment for each society rather than open to international consensus.

Furthermore, population policy has reached an impasse where: (i) it is seen largely as an instrument for addressing rapid population growth in developing countries, rather than demographic concerns more generally; (ii) the effectiveness of family planning and reproductive health programs in some countries has fuelled a belief that further progress is assured, whereas many countries face decades of rapid population growth unless there is sustained international support for social and economic development and policy implementation; (iii) some associate population policies with repressive regimes although, in many cases, the policies have been a means of reducing mortality and improving living conditions, especially for women and children; (iv) the emergence of below replacement fertility has also created an impression that such policies can have unintended consequences, whereas very low fertility is an outcome of social and economic changes.

Writers offer varying definitions of population policy, but a common meaning is: "deliberately constructed or modified institutional arrangements and/or specific programs through which governments influence, directly or indirectly, demographic

change” (Demeny 2003). The aims of a population policy are defined in demographic terms. A population policy entails active or proactive interventions into demographic trends, where necessary, to avoid detrimental outcomes. Thus seeking to influence the shape of the age profile through policies supporting higher or lower birth rates, and maintaining labour force numbers through immigration, are elements of a population policy irrespective of whether governments describe them as such.

Some of the strongest advocates of national population policies in developed countries are environmentalists who regard curbing population numbers as necessary to address climate change, resource depletion and environmental deterioration. Yet substantial population decline and high levels of population aging are likely to have adverse consequences without lessening other threats to ecological sustainability, including inadequate environmental protection legislation and high per capita resource use. Economies that become burdened with severe effects of labour force decline and population aging will have fewer resources to devote to matters other than immediate needs. When governments have sought to take effective action they have preferred to focus on the causes of particular environmental problems or on fostering technological changes, rather than pursuing an untargeted and uncertain demographic ‘solution’. The fall in the population growth rates of most developed countries since the mid-1960s has done nothing to ease concerns about the environment as evidence of land degradation, extinctions, and global warming has continued to accumulate.

While many developing countries have adopted national population goals focusing on specific aspects of their populations, such as high birth rates, developed countries have had broader demographic concerns that are relevant to a number of areas of public policy. These have been addressed mostly through incorporating demographic considerations into social and economic policies, rather than through specific demographic policies. Demographic goals tend to be multi-purpose and not reducible to straightforward targets. Also, responsibility for population-related initiatives in developed countries is mostly distributed through various portfolio areas as well as through different levels of government, from local to national.

### 13.4 Interventions

Progress towards mitigating adverse consequences of population aging will depend upon: “an exploration of the demographic choices open to societies that aim not just to muddle through” (Demeny 1988: 241). Greater attention to this is right for the time because of the advantages of overseeing a range of demographic changes, and the negative consequences of not doing so. Policy interventions in developing countries have supported falls in total fertility rates from 6.0 to 2.0. Now initiatives are needed to raise total fertility rates in some developed countries by between 0.2 and 0.6 – a seemingly more difficult undertaking. Persistence of these relatively small differences is capable of transforming prospects for societies. The ethical focus for fertility-related policies is to enable women to achieve their family building goals as



social and economic changes alter their circumstances. Having more than the wanted number of children has been a policy concern in developing countries. An emerging new focus in developed countries is the phenomenon of having fewer than the desired number of children.

By 2050, the United Nations (2004: 6) projects that 58 countries may be experiencing population decline, compared with 21 at the start of the century. United Nations' surveys have shown that an increasing number of governments consider that their population growth rate is too low and recognize aging as a major concern. Yet there has not been commensurate action, partly because a fall in the size of the total population and the labour force has not been perceived as a problem over the short term in countries with high levels of unemployment (*ibid.*: 12 and 24). In some countries non-intervention has been the stated position, even where the rate of population growth is seen as too low. Thus in the Russian Federation the main concern is not to increase fertility but to achieve decent living conditions for those already born. The official position of the Russian Federation has been that the low level of fertility is a consequence of persistent socio-economic crisis (*ibid.*: 18ff.).

An emerging realization is that societies with aging populations require a balanced mix of different policy approaches. Besides policies relating to families and fertility, the mix includes increasing productivity, such as through labour-saving technologies, improving the use of existing labour resources – especially youth, women and older persons – and effecting better coordination of education and labour demand (*ibid.*: 72). Population enhancement through low mortality, low morbidity, equal opportunity and higher standards of education also constitute population-related goals for aging societies. Another aspect is Demeny's (2003) proposal for a combination of policies supporting moderate migration and a total fertility rate around 1.8 (see Chap. 8). This approach avoids the potential social and economic dislocation consequent upon marked population decline. A slow contraction in labour supply, however, could be sustainable in conjunction with capital deepening and rising labour productivity (McDonald and Moyle 2010: 248). Zero net migration and a moderate rate of population decline could also help to address concerns about resource depletion and global warming if per capita impacts do not increase. However, without positive net migration a population with a sustained TFR of 1.8 would decline by up to 20% in 50 years, depending on its initial age structure. Adverse economic consequences are likely when there is a juxtaposition of pronounced labour force decline and substantial growth in the numbers of older people.

Theories of fertility change in developed countries provide varying perspectives on the potential for policy interventions to promote a general shift from very low fertility. The Second Demographic Transition envisages very little prospect in European countries for higher fertility without thoroughgoing social change. This is outwardly consistent with the long-established belief that governments are unable to cause couples to increase their fertility (United Nations 2004: 25). Further reinforcement comes from the view that population aging is unavoidable. Two or three decades would pass before somewhat higher fertility could affect population aging appreciably, especially when larger cohorts are continuing to reach the older ages. Despite this, the cumulative effect of a small increase in fertility can be substantial

in the long run. For example, if Italy had a TFR of 1.3 from 2000 onwards, its percentage aged 65 and over would be about 31 in 2050 compared with 24 if the TFR was about 1.8. Similarly the impact of higher fertility on the number of labour force entries is necessarily delayed, but the longer low fertility continues the more difficult it will be to correct imbalances in the age structure of the labour force.

Compared with the perspective of the second demographic transition, gender equity theory provides a more positive outlook for fertility in developed countries (see Chap. 8). It envisages that the discrimination and burdens that working mothers experience can be addressed through measures to make motherhood and female labour force participation more compatible, such as through affordable child care services, part-time employment and flexible working hours. Some governments, including those of Norway and Sweden, have sought to promote greater gender equity in employment and the family and to enhance the value of children in society (United Nations 2004: 71). For example, in Norway “the Government’s ‘family friendly’ policies, aimed at both men and women, included: 1 year of paid parental leave after each birth, at least one month of which could be taken by the father; arrangements for reduced or flexible work hours for parents; and child allowances” (ibid.: 57). Norway’s total fertility rate remained in the range of 1.8–2.0 in the period 1988–2009 (World Bank 2011). Similarly, in the Netherlands, the government has sought a couple-oriented approach – moving away from a focus only on women – and has developed policy measures to “guarantee men’s involvement in childcare and childrearing responsibilities.” A further example is France’s family policies which have been described as “more pronatalist than those of many other developed countries”. They include allowances that increase with the number of children and decrease as they get older, together with support for working mothers – such as maternity leave, part-time work and nursery schools providing early childhood nurturing. Associated with this has been one of Europe’s highest labour force participation rates for women aged 25–49 (ibid.: 59). Hakim’s (2000) preference theory, together with other policy measures that some governments have implemented, further imply that birth rates reasonably close to replacement might be encouraged, not through a single strategy, but through a range of approaches that support family welfare (see Chap. 17). Government influence, therefore, can be a positive force for higher fertility (see Kent and Haub 2005: 19).

In the new demographic situation, international migration is advocated as a means of responding to population aging but, alone, it is not a sufficient response. The most rapidly aging national populations are so large that huge and socially disruptive numbers of immigrants would be required to avert population decline. Thus ‘replacement migration’ – using migration to counteract an excess of deaths over births – is often unattainable or politically unacceptable. Nevertheless, lower levels of migration can benefit the labour force and, in some situations, reduce the level of aging. In the late 1990s, 61% of population growth in developed regions stemmed from migration, much of it from developing regions. The European Union as a whole has been shifting towards more open borders and, at the same time, better regulation in order to attract selected migrants (United Nations 2004: 71). Also, some countries have successfully operated diverse yet structured immigration policies both to achieve labour force goals, through systematically applied migrant

selection criteria, and to meet humanitarian obligations in relation to refugees and family reunion.

In the long run, the aging of immigrants augments the total numbers in the older ages. Thus, for social policies, the consequences of international migration are enduring. They arise initially because of newcomers' housing, employment and welfare needs, and eventually reach renewed prominence for some because of the distinctive issues for aged care potentially arising from the aging of ethnic minorities. Important here are cultural needs, such as for communication in the ethnic language, together with appropriate recognition of dietary preferences, values, traditions and religion. Social inequality also contributes to special needs, since the aged in disadvantaged ethnic groups may be the least educated, the least integrated into the host society, the least proficient in the national language and the most dependent on their families and the welfare system for support.

### 13.5 Conclusion

The Second World Assembly on Ageing was significant in establishing a wide-ranging and internationally agreed set of responses to individual and population aging. Many issues remain, however, because of the impossibility of implementing a single comprehensive set of strategies in societies with contrasting social and economic characteristics, and because there is considerable latitude for variations within the details of particular policies. Also, the Madrid conference gave little guidance on issues concerning the economic and demographic sustainability of population aging, which underlie the long-term viability of most of the goals that the Assembly identified.

Amid ongoing global economic, social and environmental problems there is mounting questioning of the need for economic growth at all costs (Jackson 2009), as well as of the need for population growth to underpin it (Coleman 2003: 736). The transition to older age structures is significant among global concerns, but national prosperity – based on economic growth, together with maintenance of the size of national labour forces – is likely to be a prerequisite for meeting the challenges that aging will present for health and welfare systems in coming decades. Moreover, although economic considerations are prominent in many national responses to aging, continuing predicaments confronting national economies have made future prosperity uncertain. In such circumstances, population-related interventions are more likely to be delayed or disregarded, even while demographic concerns escalate.

### References

- Coleman, D. (2003). Population decline. In P. Demeny & G. McNicoll (Eds.), *Encyclopedia of population* (pp. 732–737). New York: Macmillan Reference USA.
- Demeny, P. (1988). Demography and the limits to growth. *Population and Development Review*, supplement to Vol. 14 Population and resources in Western intellectual traditions, 213–244.

- Demeny, P. (2003). Population policy. In P. Demeny & G. McNicoll (Eds.), *Encyclopedia of population* (pp. 752–763). New York: Macmillan Reference USA.
- Hakim, C. (2000). *Work-lifestyle choices in the 21st century: Preference theory*. Oxford: Oxford University Press.
- Jackson, T. (2009). *Prosperity without growth: Economics for a finite planet*. London: Earthscan.
- Kent, M. M., & Haub, C. (2005). Global demographic divide, *Population Bulletin*, 60(4), December. Washington: Population Reference Bureau.
- Kirakosyan, H. (2002, September 11–13). *From Madrid to Berlin*. In United Nations economic commission for Europe, ministerial conference on ageing, Berlin, Germany: Contribution to the Plenary Session on 13 September 2002 on behalf of the accredited non-governmental organizations, presented by Ms. Hripsime Kirakosyan, Mission Armenia. <http://www.sfu.ca/iag/events/ece2.htm>. Accessed Apr 2011.
- Lutz, W., O'Neill, B., & Scherbov, S. (2004). Europe's population at a turning point. *Vienna Yearbook of Population Research* 2004, 303–312.
- McDonald, P., & Moyle, H. (2010). Why do English-speaking countries have relatively high fertility? *Journal of Population Research*, 27(4), 247–273.
- Social Integration Branch. (2011). *Mission Statement*. United Nations, Division for Social Policy and Development, Department of Economic and Social Affairs. <http://www.un.org/esa/socdev/sib/>. Accessed Mar 2011.
- UNDESA (United Nations Department of Economic and Social Affairs). (2008). *Guide to the national implementation of the Madrid international plan of action on ageing*. New York: United Nations. <http://www.un.org/esa/socdev/ageing/documents/papers/guide.pdf>. Accessed Apr 2011.
- United Nations. (2002). *Report of the second world assembly on ageing, Madrid, 8–12 April 2002* (A/CONF.197/9), New York: United Nations.
- United Nations. (2004). *Policy responses to population decline and ageing* (Population bulletin of the United Nations, Special issue nos. 44/45). New York: Department of Economic and Social Affairs, Population Division.
- World Bank. (2011). *World development indicators databank: Fertility rate, total*. [http://data.worldbank.org/indicator/SP.DYN.TFRT.IN?cid=GPD\\_11](http://data.worldbank.org/indicator/SP.DYN.TFRT.IN?cid=GPD_11). Accessed Apr 2011.