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## Ageing and the Elderly in Indonesia Identifying Key Issues

### *Introduction*

During the past twenty years Indonesia has been experiencing rapidly declining fertility rates among large parts of its population. For more than two decades in Indonesia the concern of demographers and other social scientists, as well as policy makers, has been with curbing the rate of population growth. In this article it will be argued that a shift in focus is needed in research as well as policy-making. As a result of declining fertility and mortality levels, the age structure of large parts of Indonesia's population is changing. A process of ageing has set in, which calls for a new social science research agenda and the development of new policies. An author who identifies Indonesia's demographic position as being 'at the eve of the fourth or last stage of demographic transition' states: 'Health care and social and economic resources must accommodate an aging population; this should become a priority in future policy formulation' (Soetjipto Wirosardjono 1993:96, 100). In my opinion, the word 'future' here should be read as 'immediate future'. As will be clarified in this article, Indonesia will experience the consequences of demographic ageing already in the first decade of the next century. Hence I will make an attempt here to identify certain key issues for social science research that may help to meet the challenges ahead.

### *The problem of ageing*

As a consequence of universally declining fertility and increasing longevity, populations as well as individuals are growing older. Unprecedentedly high life expectancies at birth are recorded. Depending on a particular society's stage in the process of demographic transition<sup>1</sup>, the

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<sup>1</sup> The term is here used in the descriptive sense.

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ageing process is more or less prominent and visible. Moreover, the speed at which it takes place differs from one population to another. The ageing of a population can be described as a process that is triggered by significantly declining fertility levels, which leads to a specific combination of fertility and mortality patterns, resulting in an increasing proportion of elderly people in the population. Because of gender differentials in the demographic variables underlying the process, ageing is not gender-neutral. Except in societies where irregular sex ratios mirror a culture-based, persistent pattern of negative discrimination of girls and women, women can expect to live longer than men, and among the elderly, women outnumber men.

The demographic trend briefly outlined above is imposing new conditions for cultural and socio-economic development, and calls for new research agendas and policies. At the individual level, a new division of the course of life is emerging. The use of the term 'third age' has come into vogue to denote the lengthening post-productive phase in the life course of growing numbers of elderly people (Laslett 1991:1-9). Changes in the division of the course of life at the individual level will have to be dealt with by society at the institutional and the political level. The process of demographic ageing will be reflected in the greying of the work force as well as the electorate, which, according to the social historian Laslett, will render the present educational system obsolete (Laslett 1991:159-80).

At the micro-level of individual and primary networks, ageing will lead to a change in the balance between the demand for and the provision of care, with inevitable consequences for public social security and care systems. It is this aspect in particular that is most problematic for developing countries that are experiencing demographic ageing and lack the necessary public social infrastructure to accommodate the rising demand for care for the elderly. As awareness of the problem increases, generalizations usually begin to abound about the strength of family ties and obligations in developing countries, which seem to have an ideological rather than an empirical basis. 'Ideological conviction and generalizations are not very helpful, however, to guide policy responses to the unparalleled speed of population aging and social change expected in the coming decades, particularly in developing countries having severely constrained resources' (Hashimoto and Kendig 1992:3-4).

### *Demographic transition in Indonesia*

In Victor King's state-of-the-art review of the sociology of South-East Asia the significant work that has been done in the field of the social demography of Indonesia is glossed over. Perhaps King classifies this kind of research under the heading 'applied sociology', which, as he says, requires separate treatment and therefore is not dealt with in his article. With respect to some of the work in social demography this may be a valid argument. It should be noted here that King does stress the value of

applied sociology in South-East Asia (King 1994:175). Be that as it may, much work in the field of social demography in Indonesia cannot simply be brushed aside as 'applied research'. This is especially true of the work of Indonesian and foreign scholars attached to the Demographic Institute of the Universitas Indonesia in Jakarta and of that of the (more sociologically oriented) Population Studies Centre of Gadjah Mada University in Yogyakarta. Some of this work is both outstanding and relevant to the sociology of Indonesia in a theoretical sense. The relatively little research that has been done on the process of demographic transition in Indonesia and its social ramifications was conducted largely by members of these institutes.

Over the past decades the main focus of socio-demographic research has been on fertility (see Singarimbun 1989). In a book on demographic transition in Asia which was published eleven years ago (Jones 1984), the theme of fertility (decline) still dominates the argument. Five years later, however, the Institute of Southeast Asian Studies in Singapore published a book on ageing in Asean countries (Chen Ai Ju and Jones 1989).

The most decisive factor in the demographic transition process is the change in fertility. Between 1967 and 1991 the total fertility rate in Indonesia fell from 5.605 to 3.022.<sup>2</sup> Fertility decline came about primarily as a result of the rise in the (female) age at marriage and high levels of contraceptive acceptance (Djuhari 1993:261-4). A more detailed analysis of the fertility decline in Indonesia points to a strong top-level political commitment to the goal of lower fertility and economic stabilization as an explanation for the high level of contraceptive use in all strata of the Indonesian population (McNicoll and Singarimbun 1986:108-16). The comparative equality in the position of women and men in Indonesian society and the general absence of a strong preference for either sons or daughters can be seen as being conducive to low fertility as well (Niehof 1994).

The demographic transition in Indonesia is taking place at regionally varying rates. Indonesia as a whole is expected to reach the end-point of its demographic transition<sup>3</sup> in the years 2000-2005 (Aris Ananta et al. 1992:2). National averages obscure regional variations with respect to the stage of demographic transition, however. The demographically most advanced regions are the provinces of Bali, East Java, Yogyakarta and North Sulawesi. The Javanese provinces, with the exception of West Java – which has always been somewhat un-Javanese in a demographic respect (cf. Gooszen 1994) – are expected to complete their demographic transition and to have reached replacement-level fertility before the year 2000.

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<sup>2</sup> The total fertility rate is the estimated average total number of children born to women by the end of their reproductive period.

<sup>3</sup> Demographically defined as the point at which the net reproduction rate is equal to one.

The same holds for Bali and North Sulawesi (Aris Ananta et al. 1992:3).

The particular stage in the process of demographic transition is reflected in the dependency ratio, which is the ratio of the population aged under 15 plus the population over 65 to the population aged 15-64. Roughly speaking, this ratio indicates the numerical relationship between dependants and providers in a given population. The dependants may be either young (under 15) or old (65 and over). Fertility decline will reduce the share of the young in the ratio. As a result, the total dependency ratio will initially decrease. After this initial decline, however, it will eventually rise again because of the increasing proportion of elderly dependants (Hugo et al. 1987:335). Japan provides a good example of this, as the calculations of its dependency ratios between 1890 and 2025 show (Kono 1989:116). Djuhari (1993) considers the period of low dependency ratios, before this ratio rises again – as it is estimated to do around the year 2010 – as ‘a golden opportunity for national development’ for Indonesia.

Let us take the Daerah Istimewa (special province) of Yogyakarta as an example. Over the past decades it had the lowest fertility levels in Indonesia (Hull and Dasvarma 1988). For the period 1990-95 its total fertility rate is estimated at 2.110 – the lowest of all 26 of Indonesia's provinces. The province is expected to maintain this leading position in the coming decades (Aris Ananta et al. 1992:18). In the literature on Yogyakarta, poverty and high population density have been put forward as factors explaining the inclination of the population to practise birth control, using traditional as well as modern methods (Singarimbun and Penny 1976; McDonald and Sontosudarmo 1976; McNicoll and Singarimbun 1986). In 1990, the province of Yogyakarta had the highest proportion of inhabitants aged 65 and over, being followed by Central Java, East Java, Bali and North Sulawesi (Aris Ananta et al. 1992:22). On the basis of the 1990 census data, the age structure of Yogyakarta's population (2,912,611 in all) can be differentiated according to sex and rural-urban residence variables as follows:

Table 1. 1990 Population of D.I. Yogyakarta according to Age, Residence and Sex

Age Group	Urban			Rural			Urban + Rural		
	Men	Women	Total	Men	Women	Total	Men	Women	Total <sup>4</sup>
0-14	27.0	25.6	26.2	31.2	28.6	29.9	29.4	27.3	28.3
15-64	67.8	67.4	67.6	61.5	62.5	62.0	64.1	64.6	64.4
65 +	5.2	7.0	6.2	7.3	8.9	8.1	6.5	8.1	7.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

(Source of absolute figures: BPS 1992:3, table 02.)

<sup>4</sup> The 1990 percentage proportions of the age groups 0-14, 15-64, and 65+ of the Indonesian population as a whole have been estimated at 36.7, 59.9, and 3.5% respectively (Hugo et al. 1987:335).

There are two conclusions to be drawn from this percentage distribution. In the first place, both in rural and urban areas the percentage of women aged 65 and over of the total number of women is greater than that for men. In Yogyakarta, too, women appear to live longer than men. Secondly, the proportion of elderly in rural Yogyakarta is larger than that in urban Yogyakarta. When this is combined with the finding that there is a larger proportion of young dependants in rural areas than in urban areas, it can be seen that rural Yogyakarta's dependency ratio compares unfavourably with that of urban Yogyakarta.<sup>5</sup> Assuming that the ageing process in the province of Yogyakarta, although it is ahead of that in the other provinces, is not atypical, these conclusions suggest that gender and urbanization are variables to be taken into account in ageing research and policies in Indonesia.

#### *The emergence of a policy issue*

The Bali Declaration, issued at the Fourth Asian and Pacific Population Conference (in August 1992), devotes a whole chapter to the problem of ageing and urges governments to 'formulate long-term development strategies that take into consideration the changing age structure of the population, in particular the implications of population ageing for economic and social development' (*Bali Declaration* 1992:18). We may assume that the Indonesian government endorses this statement, because it is a co-signatory of the said Declaration. The social geographer Hugo describes ageing in Indonesia as 'a neglected area of policy concern', however. He attributes this neglect to a preoccupation with other issues, such as the continuing high overall annual population growth, the uneven population distribution, and under- and un-employment (Hugo 1992:207). When we look at the document prepared by Indonesia for the International Conference on Population and Development in Cairo in 1994, we see that Hugo's observation is borne out by the three main population issues listed in the document. These are: population quality, population growth and quantity, and uneven population distribution. Even so, the changing demographic structure (including increasing longevity) is mentioned as one of five priority concerns (*Indonesia Country Report* 1994:52-5). Thus ageing is becoming a policy concern, even though it is not yet the subject of a long-term strategy, as called for by the *Bali Declaration*.

There are several public sectors that are affected – in a more or less direct manner – by the changing age structure of the population, namely education, employment, health and welfare. Djuhari (1993:271-2) points

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<sup>5</sup> When analysing the difference between rural and urban dependency ratios, it should be kept in mind that the institutions for higher education in Yogyakarta city attract many young adults, also from outside the province, who in a sociological sense are dependants. The rural-urban discrepancy is greatest for the 20-24 and 25-29 age groups (BPS 1992:3).

out that the trend of decreasing pressure as a result of decreasing numbers of school-age children as an outcome of declining fertility is offering opportunities for improving the quality of education. He also expresses some concern that the greying of the work force may negatively affect its quality because of the comparatively low level of education of older people. These issues are subsumed under what is referred to by the above-mentioned *Indonesia Country Report* as 'population quality'. Thus ageing has certain positive effects, creating opportunities, as well as negative ones, namely as regards population quality. There are two socio-demographic developments that affect the problem of ageing. The first is urbanization. The second is the increasing participation of women in the labour force.

While in 1990 the urban population constituted 29 percent of Indonesia's total population, for the year 2020 this percentage is estimated to reach 52 (Djuhari 1993:270). In the above-cited example of Yogyakarta we found the percentages of elderly people of the total population to differ according to sex and rural-urban residence. It is not clear whether increasing urbanization will cause the age differences between rural and urban populations to become greater. Hugo denies that it will. He says: 'Despite the rural bias in the distribution of aged people as compared to the total population, the urban aged population is increasing twice as fast as the rural aged'. He also notes that 'urban areas attract and retain more older females than males', because older women, especially widows, are inclined to join their children living in urban areas rather than stay behind in rural areas (Hugo 1992:216). This pattern is not (yet) visible in the Yogyakarta census figures, however.

Although problems of definition (cf. Van Velzen 1994:59-64) hamper our chances of obtaining a clear picture of female participation in the labour force, indicators point in the direction of an increase in this participation (Niehof 1994:19). On the one hand, the circumstance of having paid jobs may enable daughters to support their parents financially, in the same way as sons (may) do. On the other hand, the fact that they are tied to formal working arrangements will prevent daughters from playing the traditional role of care giver at home in a situation of parental coresidence. This role is compatible with work in agriculture or in the informal sector, but not with that in the formal sector. Sons have never been assigned the role of providers of day-to-day (physical) care, so that for them there is no discontinuity.

If rapid urbanization and the increasing labour participation of women is indeed going to decrease children's ability to provide daily care for aged parents who are in need of such care, public provisions will be necessary to guarantee urban and rural elderly, both men and women, a minimal standard of living and access to care. Aside from this, the health and welfare of the elderly should become a public policy concern in themselves. This will necessitate shifts in public health research and facilities. The results of a public health survey conducted among a random sample of 200

individuals belonging to five age groups in a densely populated area in Jakarta revealed an age- and gender-specific pattern of health complaints, notably about the eyesight (cataracts), the joints (rheumatism), and the heart, as well as about diabetes mellitus. They also showed that distance from health facilities in many cases provided the main reason why people did not seek help (Kartari 1993:27-59). On the other hand, according to the results of research undertaken by the Indonesian Epidemiological Network (JEN), more than two thirds (71.7%) of the elderly (aged 60 and over) questioned about their physical condition stated themselves to be in good health (Rahardjo et al. 1994:24). In the next section I will take a closer look, as far as the data permit, at the actual situation of the elderly in Indonesia.

*The situation of the elderly in Indonesia: Rhetoric*

In 1982, the Indonesian delegation to the World Assembly on Aging (in Vienna) was (still) able to speak of ageing in Indonesia as a less pressing issue than other economic and social issues. Furthermore, the delegation pointed out that care and housing for the elderly posed no social problem in view of a tradition of communal and familial support. In the paper presented by Indonesia, the denial of an ageing problem as a result of the supposed support of the elderly by children and other relatives is formulated in ideological-religious terms by reference to the Pancasila (Indonesian state philosophy). The relevant passage states: [The philosophy of life of the Indonesian people will] 'deem it sinful if children and relatives will be neglecting their elders, and those children and relatives will on the other hand feel themselves lucky and honored, if they are in a position to make their elders happy' (*Indonesian Country Paper* 1982:2). There seems to be a slightly defensive note in this statement. In the background, one may detect an echo of the debate on Asian values, which supposedly tend to promote communalism and solidarity, as opposed to individualism and egoism, which allegedly came in the wake of modernization in Western societies ('Asian values', *The Economist*, 28 May 1994:13). As was noted above, limited attention was paid to ageing in the Indonesian policy document prepared for the Cairo international population conference. At the policy level, the kind of ideological assumptions that figure so prominently in the 1982 document may be a factor in this. At least, Hugo believes this to be the case, saying: 'The other issue which has militated against ageing being considered a significant policy issue is the belief, which takes on the aura of conventional wisdom among policy makers, that the Indonesian traditional extended family will take care of the elderly population as it has in the past' (Hugo 1992:207).

However, there is no such thing as 'the extended family' in Indonesia. Not only do kinship, family and household organization differ from one ethnic group to another, but they are also subject to change. The average household size in Indonesia has been declining over the past years – from



5.2 to 4.5 in the period 1980-90 – and is estimated to drop to 3.8 by the year 2005 (*Indonesia Country Report* 1994:52). A study on the impact of fertility decline on familial support for the elderly in Thailand states that 'probably more than any other aspect of the social changes affecting Thailand and the third world in general, fertility decline is seen as having the most direct impact on reducing the extent to which future generations of elderly will be supported by their children' (Knodel et al. 1992:94-5). This applies to Indonesia as well. So let us put the rhetoric aside and turn to the facts, as far as they are available.

*The situation of the elderly in Indonesia: Facts*

Although scarcely documented, the increasing acceptance of family planning and decline of fertility levels in Indonesia are part of a process of cultural change (cf. Robinson 1989). The old Indonesian saying '*banyak anak, banyak rezeki*', meaning 'many children bring prosperity', seems to have become a relic of the past. Many people now want to have few, but healthy and well-educated, children. '*Dua anak cukup, laki perempuan sama saja*' ('two children is enough, whether boys or girls, it does not matter') is the slogan of the family planning programme. Is having a few, but healthy and well-educated, children a better guarantee for a well-provided old age than having many children? In an analysis of survey data relating to the province of East Java<sup>6</sup> a number of demographers attached to the Lembaga Demografi in Jakarta tried to answer the question of what children contribute to parent survival. Despite the numerous methodological pitfalls involved in such an exercise, the investigators concluded cautiously 'that the levels of children's education can contribute to parents' longevity' (Molyneaux et al. 1989:123). Another finding is 'that urban parents are more likely to be living with their children, but that [among rural households the] households whose primary source of income is agriculture report significantly higher levels of parents living with their children' (Molyneaux et al. 1989:119).

Two indices of children's support of parents are involved here. The first is contribution to longevity, which may be taken as an indicator of care. The second is coresidence. Both are used in the above-mentioned study on the impact of fertility decline on familial support for the elderly in Thailand. This study distinguishes between coresidence and material support provided by either coresident or non-coresident children. Fertility decline appears to have the strongest impact on the number of coresident and supporting children, and less influence on the phenomena of coresidence

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<sup>6</sup> Two sources were used for this: firstly, the 1980 nationally implemented SUSENAS (National Social and Economic Survey), from which the sample for the province of East Java was taken, and secondly, the East Java Population Survey (EJPS), conducted in 1980, 1981, and 1982 with the aim of checking the reliability of vital registration data in East Java (Molyneaux et al. 1989:116).

with and support by children, although these also show a declining trend (Knodel et al. 1992:89). In a survey among groups of elderly in Fiji, the Republic of Korea, Malaysia, and the Philippines it appeared that only about three percent were living on their own. More than half the respondents were living together with children and grandchildren, with or without a spouse. As regards material, instrumental or emotional support provided by children, the results differ according to country and gender (Esterman and Andrews 1992:277-82). Malaysia and the Philippines, which are culturally closest to Indonesia, lag behind large parts of Indonesia (notably Yogyakarta, East Java, Central Java, Bali and North Sulawesi) as regards fertility decline and stage of demographic transition. What data do we have for Indonesia as regards the situation of the elderly? These data are limited, fragmentary and not altogether unambiguous. Especially the urban-rural differences which we have noted so far yield a complex pattern, probably due to the effects of intermediate variables. The survey conducted among 200 respondents in a densely populated urban area (see above) reports that 'the overwhelming majority of the elderly live in families, especially [with] their children', as they like to do, although housing conditions actually do not always permit coresidence. At the same time, life within the family also poses many problems. These arise from changing values, limited space, and the economic dependence of the elderly. The author of the report notes somewhat pessimistically that 'building of small unit houses can disrupt the generation structure of family life and leave many old people without the close support of a family group'. Although this would ease the tension between the coresiding generations, it will increase the need of the elderly for community care (Kartari 1993:47-8).

The JEN survey (see above) covered rural as well as urban areas. Only 1.5 percent of the elderly interviewed proved to be living on their own. The majority (84.2 percent) owned the house in which they lived. Unexpectedly, 53 percent of the respondents (aged 60-69) were still providing for child(ren) (*masih mempunyai tanggungan anak*). This finding has to be seen in relation to the circumstance that the majority of the respondents, in spite of their advanced age, still derived their income from their own work (58.5 percent) or the work of their spouses (19.5 percent) and were in a position to provide for themselves and their families. These percentages are significantly higher for the rural than the urban areas. Next comes the group (27.5 percent) of individuals whose situation is the exact opposite. Their daily needs are provided by their children and children-in-law. In this case, as one might expect, the rural-urban difference is the reverse (Rahardjo et al. 1994:21-5). The picture that emerges from this (admittedly limited) survey is that the rural elderly predominate as care providers in spite of their age, whereas urban elderly tend to be more on the receiving side. Altogether, this picture looks to be less problematic than that emerging from the Jakarta survey.

Aspects of emotional well-being were also investigated in both surveys. In the Jakarta survey questions were asked about loneliness, for instance. While the majority of the respondents of all age-groups said they never felt lonely, 5.9 percent of the elderly male and 11.4 percent of the female respondents admitted to frequent feelings of loneliness (Kartari 1993:41). This question was not asked in the JEN survey. However, as we already mentioned above, more than two thirds of the respondents stated themselves to be in good health. Furthermore, in reply to a question about changing values in society, a sizeable group (38.7 percent) said they felt that the younger generation has an increasingly caring attitude (*acuh*) towards elderly people. They also stated themselves to think that they had less say in the choice of partner or of place of residence of their children than in former times (Rahardjo et al. 1994:23). Irrespective of how the respondents evaluate these (perceived) changes – which the report does not indicate – it is clear that the relationship between the elderly and the young is changing and that people are aware of this. But again, the picture that emerges from the JEN survey is certainly not a gloomy one.

The studies discussed above do not differentiate according to gender. In a research project investigating the situation of the elderly in the area around the city of Surakarta (Central Java) that was carried out in the late eighties, this distinction was made, however. It is worthwhile mentioning some of the findings of this research. The residential pattern of elderly women appeared to be quite different from that of elderly men, because women live longer, are generally younger than their husbands, and consequently outlive their husbands. As a result, there are not only far more elderly women than elderly men (which corroborates the Yogyakarta data discussed above), but also more women living alone. More elderly men live with their spouses in nuclear households than do elderly women. There are more widows living on their own than there are men in this situation (Evans 1985:5). Hugo, moreover, when doing fieldwork in West Java, was struck by 'the loneliness, poverty and deprivation of older widows and never married women who lived on their own and often had to rely on the charity of the community to survive' (Hugo 1992:214). A second finding of Evans's concerns the differences in income situation between elderly men and women. At the individual level, elderly men more often have an income of their own than do women, while elderly women receive far more transfers (gifts) than do elderly men (Evans 1985:6). Thus, elderly women outnumber elderly men, and rural elderly women are in a more dependent position than are rural elderly men.

In spite of the fact that the overwhelming majority of Indonesian elderly people live in families, Indonesia has a number of institutional homes for the aged. Regrettably, I do not have any data on the number of people living in such homes and receiving institutional care. Presumably, such data will be available at the Indonesian Ministry of Social Affairs, at least as far as government institutions are concerned. A study of the aged in homes for

the aged in Jakarta reports that 69.4 percent of the aged living there come from the lower socio-economic strata of society, and that their economic situation improved when they came to live in a home for the aged in comparison with their previous situation. Although it might therefore look as if such a home represented the last resort for destitute elderly, a major reason for entering such a home, according to the report, is conflict with a son- or daughter-in-law with whom the respondent was staying prior to moving to the home<sup>7</sup>; moreover, once living in such a home for the aged, the elderly 'generally are happy and satisfied' (Rianto 1982:68). This conclusion is not in agreement with the popular notion of the institutional home for the aged as an invention of the modern, egoistic West, where the aged are not able to fall back on their children and other relatives. Apparently there is a need for such homes, also in Indonesia, and living in one is not by definition something distressing.

A last issue to be dealt with in this section is that of government-provided old-age security. In an article on the subject of the social security system in Indonesia by Hendra Esmara and Prijono Tjiptoherijanto, the notion of the viability of culture-based, traditional social security provisions again crops up, albeit in a more low-keyed and balanced way than in the 1982 *Indonesian Country Paper* cited above. The authors put it as follows: 'The rapid economic growth and development, particularly in the seventies, has already outpaced the growth of the modern social security laws and regulations. The gap, however, has been filled by the traditional, culture-based social security system. It can be expected that the traditional social security system will exist side-by-side with the modern schemes in the future' (Hendra Esmara and Prijono Tjiptoherijanto 1986:54). Let us again look at the facts. At the time the article was written, social security insurance schemes of several kinds were still only available to civil servants (including members of the armed forces) and industrial workers. In 1986, this implied access to social security insurance schemes for 11.5 percent of the work force (Hendra Esmara and Prijono Tjiptoherijanto 1986:56). Although the authors report a partial extension of the system by the government and the development of social security schemes by private companies, the situation is, in my estimation, still far from satisfactory. In any case, large numbers of Indonesians working in the so-called 'informal sector', many of them women, will have to rely on their own savings and material and social resources.

#### *Identifying key issues for research*

Since demographers have turned their attention to the immediate institutional context of individual lives, instead of looking at individuals just as elements which make up population aggregates and households as gate-

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<sup>7</sup> Of course, in a situation of constraint and limited means it is especially difficult to maintain a harmonious relationship with a living-in parent-in-law.

ways to individual data for enumerators, ageing can be placed in a different demographic light as well. Although family and household studies are still 'unfinished business' items on the population studies agenda (McNicol 1992:411), they provide a relevant paradigmatic framework for the study of ageing. This holds especially true for the study of ageing in developing countries, where its implications are primarily felt within households and families, as we have seen above.

From the data presented so far we can conclude that, when selecting households and families as units of analysis, these will have to be placed in a wider context defined by a number of variables that can be expected to have a differential effect on the position of the elderly in households and families. These are: location of the household or family concerned, particularly with respect to the rural-urban axis; socio-economic class, in the sense of both income position and professional background, notably employment in the agrarian or the non-agrarian sector; and demographic factors, such as migration. Gender is a contextual as well as a dependent variable. As a contextual variable, gender also interacts with other contextual variables. The above-cited study by Evans, for example, shows that the economic position of Javanese rural elderly women is worse than that of rural elderly men.

Another contextual variable which has not featured in any of the studies consulted so far is ethnicity. If ethnicity has proved to make a difference for fertility patterns (cf. Tan and Soeradji 1986), we may presume that it will also influence the position of the elderly. In a general sense, ethnicity provides a cultural context which will include values and norms with regard to old and 'third' age, the relationship between the old and the young, and obligations and responsibilities towards elderly people. In a more specific sense, ethnicity will work as a contextual variable through kinship, because kinship provides a basis for household and family recruitment and sponsoring.

Kinship is a key factor in determining the life situation of elderly people. One may compare the benefits of kinship relationships to those of an insurance scheme. But, where insurance schemes depend upon the relationship between individual members and an institution whose function it is to inspire trust, kinship networks can create the same effect 'precisely because the network of relationships is drawn from a field of relationships characterized by social solidarity and diffuse obligation prior to any actual flows of benefits occurring' (Harris 1990:61). Depending on the nature of the given kinship system, which may differ from one ethnic group to another, the field of relationships to draw upon may be more or less extended, bounded or structured. It is important here to distinguish between lineal and bilateral kinship systems, both of which are found in Indonesia. 'Lineal versus bilateral kinship places the older person in a bounded social group within which resources are collectively owned, and whose lineal, genealogical focus favours seniority as a basis for both secular and ritual

authority. Bilateral kinship places the older person, like all members of such societies, in a network of relationships out of which group bonds *may* be created, depending on proximity, mutual interest, and individual attraction' (Keith 1992:25). Among the bilateral Madurese I found two distinct patterns of parental coresidence and parent care. In the fishing village of Patondu, daughters inherited the parental house and remained in the parental compound after marriage. Not all daughters actually did so, but they were entitled to. Daughters who did stay on in their parental compound with their families were expected to look after and care for their parents when they reached old age. It was a reciprocal arrangement. In the agrarian village of Tambeng the same kind of reciprocity was observable. Here, however, sons stayed on in the parental compound, inherited twice more land than daughters, and were obliged to provide old-age security for their parents (Niehof 1985:147-85).

Family obligations – whatever form they may take – are also redefined in the course of time. Mutual support between kin is affected by social change and cannot be taken for granted. Demographic changes, notably in the age structure of the population, can be expected to have a profound influence on the nature and degree of support between kin. As Finch notes: 'Changes in the dependency ratio have expanded the need for younger generations to provide care to older people, but have also affected their capacity to do so' (Finch 1989:100). This statement refers to Britain, but it applies just as much to Indonesian regions where demographic ageing has set in.

Indonesia's largest ethnic group, the Javanese, have a bilateral kinship system. In terms of fertility decline, demographic transition, and population ageing, they are front-runners, being followed by the Balinese and the Menadonese. The Javanese, then, have a network of bilateral kin to draw upon for old-age support. We have already concluded that, contrary to what all the rhetoric about kinship solidarity may suggest, this support cannot be taken for granted. I would like to emphasize the adjective *diffuse* in the above quotation from Harris, where he mentions kinship-based obligations, and the verb *may* in that from Keith, which – with good reason – she has italicized herself. Finch and Mason warn that in the area of family responsibilities the relationship between expressed beliefs and action in practice is more complex than in all other areas of social life, family relationships included (Finch and Mason 1993:28), and I think they are right. The key concept they use to analyse the theory and practice of family responsibilities is 'negotiation'. Whether implicitly or explicitly, negotiation always takes place. In Javanese culture we may expect such negotiation to bear a rather more implicit character. To a large extent this complicates matters considerably, not only for the researcher but also for the elderly people and their kin themselves. Given the on-going process of socio-cultural change and factors such as migration, urbanization, increasing participation of women in the labour force and decline in average

household size, the tacit expectations of elderly people may in the end be frustrated. By the time the problems rise to the surface, it may be too late for viable solutions. When the gap between norm and practice becomes too wide, a negotiation process in which the one party draws upon a partly obsolete normative framework and the other is confronted with practical constraints in meeting the normative expectations is doomed to failure.

The key issues for research that emerge revolve around the subject of support for elderly people by households and kinship networks. The nature and degree of such support will be determined by a number of variables, the foremost of which is the demand for support. This demand for support would have to be differentiated according to various variables, for example, medical, economic, and social. It is important here to distinguish between coresident and non-coresident elderly. The supply side is multi-dimensional as well. Both supportive and constraining factors have demographic, economic, and socio-cultural dimensions. Support should also be seen from a multi-level point of view and, starting from individuals, households and kinship networks, the contribution of local communities and the role of the state should be placed in perspective.

Gender cross-cuts all other issues, whether they arise from the demand or from the supply side. As regards the latter, there are at present in Indonesia two concepts referring to role models for women which are relevant to our discussion. The first is the concept of *ibu*. Although the word means 'mother', the *ibu* role model is more encompassing than the mother role (cf. Djajadiningrat-Nieuwenhuis 1992). *Ibu* is also a respectful term of address for women, irrespective of whether they have children or not. It stands for providing care and material and moral support not only for children but also for other dependent people within a particular social circle. This classical role model would naturally also involve being an *ibu* to elderly people. A question here is how this role model applies to mother-daughter relationships, in which the daughter increasingly assumes *ibu* characteristics and the mother becomes gradually older and dependent. The second concept is that of *ibu rumah tangga* (housewife). Here we are not talking of a classical role model but of a modern one, the emergence of which should be related to the nuclearization of the family and the decrease in household size. As in Malaysia, 'modern schooling and mass communication [...] foster a new housewife identity' (Rudie 1994:277). It can be hypothesized that the modern housewife will focus her attention and provision of care more exclusively on her own nuclear family and household than the traditional *ibu*, for whom family and household boundaries were rather fluid. Apart from *ibu* and modern housewives, one might distinguish a third category of Indonesian women: women who actively participate in the labour force. They may or may not have husbands and children, but their daily lives are increasingly structured by their work rather than by their domestic and family backgrounds. These women do not form a homogeneous category, as we are talking here of profes-

sionals as well as workers in industry and trade, of upper-class as well as lower-class women. The question, however, is how the role of care-giver with respect to elderly people fits in with these different role models.

To be of relevance for the situation of the elderly in Indonesia, research will have to be directed at identifying foreseeable critical situations and structural problems. It should be multi-disciplinary in order to do justice to the complexity of the subject and lay the foundations for a comprehensive policy.

#### REFERENCES

- Aris Ananta, Evi Nurvidya Anwar, and Chotib, 1992, *Indonesia; A Country of Many Different Stages of Demographic Transition*, Jakarta: Demographic Institute. [Paper Series 7.]
- Bali Declaration, 1992, *Bali Declaration on Population and Sustainable Development*, issued at the Fourth Asian and Pacific Population Conference, 19-27 August, Bali, Indonesia, ST/ESCAP/1195, Bangkok: United Nations.
- BPS, 1992, *Penduduk D.I. Yogyakarta / Population of D.I. Yogyakarta; Hasil Sensus Penduduk 1990 / Results of the 1990 Population Census*, Jakarta: Biro Pusat Statistik. [Seri/Series S2.12.]
- Chen Ai Ju, and Gavin W. Jones (eds), 1989, *Ageing in Asean; Its Socio-Economic Consequences*, Singapore: Institute of Southeast Asian Studies.
- Djajadiningrat-Nieuwenhuis, Madelon, 1992, 'Ibuisism and Priyayization; Path to Power?', in: E. Locher-Scholten and A. Niehof (eds), *Indonesian Women in Focus*, pp. 43-52, Leiden: KITLV Press. [Second impression.]
- Djuhari Wirakartakusumah, M., 1993, 'Demographic Transition in Indonesia and its Implications in the 21st Century', [Proceedings of the] *International Population Conference, Volume 2*, pp. 259-77, Montreal: International Union for the Scientific Study of Population.
- Esterman, Adrian, and Gary R. Andrews, 1992, 'Southeast Asia and the Pacific; A Comparison of Older People in Four Countries', in: Kendig et al. (eds) 1992:271-90.
- Evans, Jeremy, 1985, 'Old Age Security in Indonesia and its Implications', *Research Note 85 International Population Dynamics Program*, Canberra: Australian National University.
- Finch, Janet, 1989, *Family Obligations and Social Change*, Cambridge: Polity Press.
- Finch, Janet, and Jennifer Mason, 1993, *Negotiating Family Responsibilities*, London: Routledge.
- Gooszen, A.J., 1994, *Een Demografisch Mozaiek; Indonesië 1880-1942*. [Ph.D. thesis, Landbouwniversiteit Wageningen.]
- Harris, C.C., 1990, *Kinship*, Buckingham: Open University Press.
- Hashimoto, Akiko, and Hal L. Kendig, 1992, 'Aging in international perspective', in: Kendig et al. (eds) 1992:3-15.
- Hendra Esmara, and Prijono Tjptoherijanto, 1986, 'The Social Security System in Indonesia', *ASEAN Economic Bulletin* 3:53-68.
- Hugo, Graeme, 1992, 'Ageing in Indonesia; A Neglected Policy Concern', in: David R. Philips (ed.), *Ageing in East and South-East Asia*, pp. 207-31, London: Arnold.
- Hugo, Graeme J., Terence H. Hull, Valerie J. Hull, and Gavin W. Jones, 1987, *The Demographic Dimension in Indonesian Development*, Singapore: Oxford University Press. [East Asian Social Science Monographs.]
- Hull, T.H., and G.L. Dasvarma, 1988, 'Fertility Trends in Indonesia 1967-1985', *Bulletin of Indonesian Economic Studies* 26-1:115-22.
- Indonesia Country Report*, 1994, *Indonesia Country Report on Population and Development*, Jakarta: State Ministry of Population and National Family Planning Coordinating Board.



- Indonesian Country Paper*, 1982, *Indonesian Country Paper for the World Assembly on Aging; The Problem of Aging in Indonesia*, Vienna, July 26 - August 6.
- Jones, Gavin (ed.), 1984, *Demographic Transition in Asia*, Singapore: Maruzen Asia.
- Kartari, 1993, *Final Report; Study of the Determinants of Healthy Aging and Age-associated Diseases in the Indonesian Population*, Jakarta: Ministry of Health.
- Keith, Jennie, 1992, 'Care-taking in Cultural Context; Anthropological Queries', in: Kendig et al. (eds) 1992:15-31.
- Kendig, Hal, Akiko Hashimoto, and Larry C. Coppard, 1992, *Family Support for the Elderly; The International Experience*, Oxford: Oxford University Press. [Oxford Medical Publications, on behalf of WHO.]
- King, Victor T., 1994, 'The Sociology of South-East Asia; A Critical Review of Some Concepts and Issues', *Bijdragen tot de Taal-, Land- en Volkenkunde* 150:171-207.
- Knodel, John, Napaporn Chayovan, and Siriwan Siriboon, 1992, 'The Impact of Fertility Decline on Familial Support for the Elderly; An Illustration from Thailand', *Population and Development Review* 18-1:79-105.
- Kono, Shigeni, 1989, 'Population Structure', *Population Bulletin of the United Nations* 27:108-24.
- Laslett, Peter, 1991, *A Fresh Map of Life; The Emergence of the Third Age*, Cambridge, Massachusetts: Harvard University Press.
- McDonald, Peter F., and Alip Sontosudarmo, 1976, *Response to Population Pressure; The Case of the Special Region of Yogyakarta*, Yogyakarta: Gadjah Mada University Press.
- McNicoll, Geoffrey, 1992, 'The Agenda of Population Studies; A Commentary and Complaints', *Population and Development Review* 18-3:399-421.
- McNicoll, Geoffrey, and Masri Singarimbun, 1986, *Fertility Decline in Indonesia; Analysis and Interpretation*, Yogyakarta: Gadjah Mada University Press.
- Molyneaux, John, M. Djuhari Wirakartakusumah, and Achmad Syaukat, 1989, 'Children's Contribution to Parent Survival', *Majalah Lembaga Demografi* 32:111-23. [Reprint Series 3, 1990.]
- Niehof, Anke, 1985, *Women and Fertility in Madura, Indonesia*. [Ph.D. thesis, Leiden University.]
- , 1994, *Family Planning and Status of Women in Indonesia*, Groningen: Population Studies Centre, University of Groningen. [Demographic Reports 17.]
- Rahardjo, Tri Budi W., Wreksono Ambudi, Retno Budiati, Dini Agustini, and Ganny Yuniar, 1994, *Peningkatan Kualitas Hidup Lansia; Laporan Temu Wicara*, Jakarta: Jaringan Epidemiologi Nasional dan Lembaga Demografi Fakultas Ekonomi Universitas Indonesia.
- Rianto, Adi, 1982, *The Aged in the Homes for the Aged in Jakarta; Status and Perceptions*, Jakarta: Pusat Penelitian Universitas Katolik Atma Jaya.
- Robinson, Kathy, 1989, 'Choosing Contraception; Cultural Change and the Indonesian Family Planning Programme', in: Paul Alexander (ed.), *Creating Indonesian Cultures*, pp. 21-38, Sydney: University of Sydney. [Oceania Ethnographies 3.]
- Rudie, Ingrid, 1994, *Visible Women in East Coast Malay Society; On the Reproduction of Gender in Ceremonial, School, and Market*, Oslo: Scandinavian University Press.
- Singarimbun, Masri, 1989, *Bibliografi Keluarga Berencana dan Fertilitas di Indonesia 1973-1988*, Yogyakarta: Pusat Penelitian Kependudukan UGM.
- Singarimbun, Masri, and D.H. Penny, 1976, *Penduduk dan Kemiskinan; Kasus Sriharjo di Pedesaan Jawa*, Jakarta: Buku Obor, Bhratara Karya Aksara.
- Soetjipto Wirosardjono, 1993, 'Population and Social Welfare', in: Jan-Paul Dirkse, Frans Hüsken and Mario Rutten (eds), *Development and Social Welfare; Indonesia's Experiences under the New Order*, Leiden: KITLV Press. [KITLV, Verhandelingen 156.]
- Tan, Mely G., and Budi Soeradji, 1986, *Ethnicity and Fertility in Indonesia*, Singapore: Institute of Southeast Asian Studies. [Research Notes and Discussions Paper 53.]
- Velzen, Anita van, 1994, 'Who's the Boss?'; *Marginalisation and Power in Food-processing Household Enterprises in West Java, Indonesia*. [Ph.D. thesis, University of Amsterdam.]