

## 25th volume celebration paper

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# Changes in the experiences of life between two cohorts of Parisian pensioners, born in *circa* 1907 and 1921

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### **ABSTRACT**

The experience of retirement and old age of two cohorts of the residents of Paris, born successively around 1907 and 1921, have been studied through prospective longitudinal studies, each of which comprised several waves of interviews. The two cohorts were first interviewed as they approached retirement and old age, in respectively 1972 and 1984. Moulded by the strong contemporaneous social change, the principal life experiences of the two cohorts have been quite different – from the social and geographic settings of their birth, their childhood and education, through their occupations and career advancement, parenting and family lives, housing conditions and residential mobility, earned incomes and pensions, longevity, and utilisation of medical care. Above all, their long lives have been strongly conditioned by rapid and radical socio-economic changes, particularly in the occupational structure, the rising standard of living, and improvements in urban housing standards, social protection, personal services and average life span. In contrast to their rising material standards, the cohorts have faced the gradual spread of less sympathetic attitudes towards older people, particularly those who lose their autonomy. As the number of people in advanced old age has relentlessly increased, they have in several respects become more distant from the rest of society. Maintaining the continued 'inclusion' and full citizenship of frail older people is not only a growing moral and practical problem, but also a major political problem in a democracy.

**KEY WORDS** – longitudinal study, cohort analysis, retirement, life course, career, residential mobility, family relationships, self-assessed health.

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## The longitudinal cohort studies

For just over two centuries in France as elsewhere, rapid social changes have altered people's life experiences to the extent, it can be said, that each generation has lived differently from its predecessor. As reported in the first issue of *Ageing & Society*, in 1974–75 the author studied a cohort of Parisian private-sector salaried staff who were born around 1907 and retired in 1972 (Cribier 1981). Later, in 1987, a similar study was made of the cohort who were born around 1921 and retired in 1984. Just 13.6 years separated the average year of birth of the two cohorts. The studies had several inter-related aims, but the main focus has been to understand the changes in the lifecourse as between the successive cohorts, and the relationships of these changes to the societal context. Two main theoretical ideas were explicit in the foundation and design of the research; that life experience was specific to successive generational groups (even two cohorts separated by only 14 years); and that the social diversity of the population had not diminished despite the spread of education, Social Security, the mass media and popular culture.

Both of the 'longitudinal panel' studies comprised in-depth face-to-face interviews and the collation and analysis of secondary data (as on pension-funds data and birth, marriage and death certificates). The samples were of 'new pensioners' who had lived and worked in the Paris urban area, whether they originated from central Paris and its suburbs, from the provinces or from foreign countries.<sup>1</sup> Three follow-up questionnaire surveys with the first cohort were undertaken in 1982, 1985 and 1995, and one with the second in 1997.<sup>2</sup> The large representative samples (1,360 new pensioners in the 1972 cohort, and 792 for that of 1984, and their spouses)<sup>3</sup> have allowed numerous observations, and the high response rates to the follow-up surveys have meant that the samples have remained representative of the survivors.

The subjects and their spouses have therefore been questioned several times about their education, professional and working lives, retirement, residential and family histories, and about their personal circumstances since they retired. In addition, the research team has collected 'life stories' and undertaken 'complementary surveys' on related topics, including 'housing and the neighbourhood', 'retirement migration' and 'moves into nursing homes'. Each new investigation has been informed by its predecessors (the more that we learnt, more and more refined questions were framed), has gathered new data, and has provided much new understanding of matters that previously were unclear, either because they had not been sufficiently investigated, or because the subjects had not wanted to speak about them. Several of the later surveys led to new interpretations

of the previously-collected data. Most recently, post-mortem surveys have been conducted with close relatives of deceased members of the cohorts. A fuller account of the extended sequence of surveys, data collations and analyses is available (Cribier and Kych 1999).

The social surveys have featured the urban living conditions, the main settings and stages of people's lives, the evolution of occupational, social and family structures, and the migrations that brought to Paris two-thirds of the first cohort and one-half of the second. We wanted to understand the roles of the changing labour, housing and marriage markets, the evolution of inter-generational relationships, the more positive images of retirement that gradually spread during the last quarter of the 20th century, and how the cohort members have experienced the now widely-recognised distinction between 'early retirement' and 'real old age'.

### **The lifecourse and retirement experiences of the two cohorts**

The 1972 cohort was born between 1906 and 1912, before the Great War, whilst that of 1984 was born just after, between 1918 and 1924. The former entered the labour force during the 1920s, whilst the latter were still very young adults in 1947, when a long period of rapid economic growth and rising living standards began. By the end of their careers in 1965–72, the first cohort had experienced the 'classic' difficulties of manual workers (unemployment, unfitness and illness). In contrast, the second cohort experienced redundancies and early retirement between 1977 and 1984, but when they left their jobs for good, their view of retirement differed greatly from the first cohort's. Comparing the two cohorts, the average age of retirement decreased by 1.6 years (from 63.8 to 62.2 years-of-age). For both cohorts, the first survey was conducted around three years after the members received their first pension (or retirement), in 1972 or 1984, so the average age of the respondents was 67 years for the first cohort and 65 years for the second. This paper presents a selection of the most interesting and important of the two cohorts' very different life experiences, including the disparities in men's and women's geographical origins and education, working lives, residential histories, pathways to and reasons for retirement, wages and pensions, family relations, life span (or survival) and health.

#### *Regions of origin and educational levels*

Migrations to the capital played a large role in the formation of the Parisian workforce and its social structure throughout the 20th century, as

revealed by the changes over 12 years in the areas of origin of the two cohorts. In the second cohort, there were more natives of the Paris urban area (*agglomération urbaine de Paris*),<sup>4</sup> fewer were born in the provinces and even fewer in rural areas, and more who came to Paris as children with their parents. In the first cohort, only 35 per cent were natives of Paris, while 45 per cent of the men and 56 per cent of the women were born in the provinces. The only constant was that in both the first and second cohort, 15 per cent were born outside France (in the first cohort, 20 % of the men and 9 % of the women). The percentage of the subjects who were raised in the French provinces and came to Paris at the age of 15 or more years decreased, from 39 in the 1972 cohort to 22 in the 1984 cohort; while the percentage who when they left school were living in the Paris urban area rose from 39 to 57 per cent.

Amongst the 605 men in the 1972 cohort who were born in France, those brought up in the Paris urban area (hereafter 'Parisians') were clearly more educated than the men who were brought up in the provinces and, as mature men, fewer worked in unskilled jobs (21 % as against 31 %). In fact, 33 per cent of the Parisian men became technicians and executives, compared with 23 per cent of the 'provincials' (French-born, non-Parisians). Among the 660 women born in France in the 1972 cohort, two-thirds in maturity were unskilled workers, low-qualified employees or cleaners. These occupations were held by 72 per cent of the 'provincial' French women, but 55 per cent of the 'Parisians'. In contrast, 14 per cent of the former were skilled office-workers and just two per cent in jobs that required the highest qualifications (*e.g.* technicians, middle and senior executives), while among the Parisian women the comparable percentages were 22 and 10.

Turning to the 1984 cohort, more of the subjects were born in Paris or arrived in the city before the age of 14 years, and among the men in this group, only seven per cent became unskilled workers, compared to 21 per cent of the men brought up in the provinces. As in the first cohort, the majority of the men raised abroad became unskilled workers. One in five of the women who were brought up in Paris had unskilled jobs, as did 27 per cent of those raised in the provinces.

One reason for the strong gender differential was that the provincial young men of both cohorts could enter an apprenticeship after primary school, which led to skilled jobs in factories and later to promotions, typically to foreman positions when aged in the forties and to more responsible supervisory posts at older ages: one in four achieved a technician or middle-rank executive job.<sup>5</sup> For women, however, only one career ladder was available, through skilled office-employment, which required having been at school until 15 or 16 years of age. Especially for the first

cohort (only 20% of the women went beyond primary school, compared to 37% in the second cohort), those who went to the secondary schools in large cities had advantages over those from rural areas, small country market towns and industrial towns.

### *Occupational experience and progression*

The working lives of the two cohorts were very different because the structure of production and the labour market (particularly the qualifications required) changed considerably over the dozen years that separated their early working lives. Moreover, during 1945–70, many male unskilled jobs were filled by young foreigners (especially Algerians), the majority of whom later returned to their countries. Consequently, many men in the first cohort, from their mid-forties, rose to supervisory positions over female and new immigrant workers. For both sexes at around 40 years of age, unskilled workers constituted one-half of the first cohort, but just one-third of the second.<sup>6</sup> The proportion who had been professional workers did not change, but the representation of technicians and executives increased, from 27 to 39 per cent for men, and from 8 to 18 per cent for women.<sup>7</sup>

The gender differentials in educational level were less in the second cohort, but the occupational disparities remained substantial. Many middle-rank executive women had the same competence as male senior managers, and many female skilled workers had the same capabilities as male technicians or middle-rank executives. Furthermore, a competent female worker never became a foreman. A woman's career was highly contingent on her family situation, namely, whether she raised children, or later in life supported her or her husband's older parents or looked after grandchildren. While for men there was a relationship between their occupational skills, experience and status, such 'professional logic' applied among women to only the most qualified – this structured occupational disadvantage was less evident in the second cohort in which more women attained jobs of higher responsibility.

### *Housing conditions and tenure*

The first cohort moved into their first non-parental home in Paris around 1930, when the majority of housing in Paris, as elsewhere in France, was by today's standards of remarkably poor quality. In 1936, the average age of the subjects was 29 years, and six in ten already had at least one child. One-half lived in a one-bedroom (or one-bedroom and kitchen) apartment, seven in ten did not have a water-closet (WC) lavatory *in* their apartment, and only two in ten had exclusive use of a bathroom. From

1950 onwards, housing construction recommenced in the Paris region, but most members of the first cohort were too old to qualify for the new, subsidised, public housing because their children had grown up.<sup>8</sup> Moreover, only one-quarter of the cohort bought property in the Paris region. During the 1950s and 1960s, some purchased the old, poor-quality housing that they occupied, because a rent-freeze had forced some landlords to sell the apartments and houses to the occupants. At the beginning of their retirement in 1975, one-half of the first cohort households were living in a one- or two-bedroom apartment, one-fifth still did not have a WC in the accommodation, and one-half had to wash in the kitchen.

Among the second cohort, most of the working-class couples lived in low-quality housing up to the age of 35 or 40 years. But because most had children and were of an eligible age to make an application, during the 1950s and 1960s more were allocated the new, subsidised social housing: at retirement three in ten of the households had such tenancies (as against one in ten of the first cohort), including every other working-class household. Furthermore, in each occupational group, a higher percentage of the second cohort was able to buy property, especially houses; helped by government subsidies and wage inflation, they were able to purchase at a younger age. The average age of the first 'house' purchase was 49 years in the first cohort and 41 years in the second.<sup>9</sup> As a consequence, when the second cohort retired they had significantly better accommodation than the first: only four per cent of their households (as against 20 % of the first) did not have an indoor toilet, and only 12 per cent (as against 50 %) had to wash in the kitchen. The 1984 pensioners were evidently the first cohort to benefit from the post-war modernisation of the city's housing and, after the 1946 Social Security reforms, to have the support of substantial family benefits and, later on, of 'good pensions'.

#### *The age of retirement and reasons for stopping work*

There were several important changes in the course of the working lives of the two cohorts before their retirements in, successively, 1972 and 1984 (Cribier 2005). In France, the median age at the end of 'active labour market participation' decreased uninterruptedly from 1954 until the end of the 1990s, from more than 66 years to 59 years (Blanchet 2005: 288). The first manifestation was that the number who continued to work after 65 years of age rapidly declined, and the second was rising unemployment amongst those aged 60 or more years (even during periods of full employment). As time passed, more people found themselves with an occupational disadvantage, in that their 'health problems' were interpreted as 'unfitness for work' or 'disability', and used to push the workers out of

TABLE I. *The age at which the subjects finally gave up work*

	1972 cohort			1984 cohort		
	Total	Men	Women	Total	Men	Women
	<i>Percentages</i>					
<b>Age at the end of work (years)</b>						
Before 55 (sickness) <sup>1</sup>	5	5	5	5	4.9	5
55-59	10	9	12	27	29.5	24.3
60	13	10	15	28	30.2	25.7
61-64	23	25	21	29	25	33.5
65 or more	49	51	47	11	10.4	11.5
Total	100	100	100	100	100	100
<b>Average age (years)</b>	63.4	63.5	63.3	60.4	59.4	60.5
<b>Sample size</b>	1170	568	602	792	409	383

*Note:* 1. The table excludes women who gave up their employment before 55 years of age for personal reasons. For the first cohort we have the age at official retirement for the entire sample of 1,360, but age at the end of work for only 1,170 people – most of them living in France. For the second cohort, all still living in France, we know the age at the end of work for the entire sample.

employment (Cribier 2005). Among the first cohort, such ‘disability’ and ‘invalidity’ affected 30 per cent, and they also experienced the introduction of managed early retirement (as for 31 % of the 1984 cohort).<sup>10</sup> Comparing the two cohorts separated by 12 years, the average age at which they stopped work decreased by three years (Table 1). Since the ‘new pensioners’ of 1984 started their working lives two years later and stopped three years earlier, the duration of men’s working life was 45 years, compared to 50 years for the first cohort. Note well that the age at which people started to receive their retirement pensions decreased by only 1.8 years.

Only one-half of the employees in the first cohort who were registered in the general pension scheme worked until the ‘normal’ age of 65 years; the others had to stop work because of unfitnes, illness or unemployment, 15 per cent of them before 60 years-of-age (Table 2). Among the second cohort, however, ‘early retirement’ replaced these problems as the reason for ceasing work, and provided a markedly higher rate of ‘earnings replacement’ pension income. One-third of the subjects stopped work before the age of 60 years, and two-thirds before 61 years. It took little time for the majority of workers to regard retirement at 60 years as ‘normal’. Along with the higher living standards and improved Social Security protection came a new sense of personal wellbeing. New and more positive images of an active and independent early retirement took hold, of the ‘third age’ that precedes ‘real’ old age (Laslett 1989). By 1984, ‘early retirement’ had become an extended and unprecedented ‘lifecourse stage’, one that no previous generation had known.

TABLE 2. *Activity status of the cohort members at the start of their formal retirement*

Status	1972 cohort		1984 cohort	
	Men	Women	Men	Women
	<i>Percentages</i>			
Economically active	50	50	49	47
Incapacitated, sick	36	34	9	9
Unemployed	14	16	10	14
Pre-retired	–	–	32	30
Total	100	100	100	100

*Pensions entitlements and incomes*

On the verge of retirement, the purchasing power of the second cohort's average income was around 25 per cent greater than the first's. The improvement owed something to the later cohort's raised qualifications and occupational levels, but was mainly brought about by 'wage drift'. Each year in France from 1948 to 1978, there was a four per cent increase in real incomes thanks to the recovery of the European economies, productivity gains and the upgrading of the labour force. The cohorts that entered employment between the end of the Second World War and the mid-1960s had a clear advantage over those born before 1920. After the first cohort began work, they experienced many difficult years, including low salaries and high rates of unemployment and job changes (some accompanied by de-skilling). While for the second cohort these conditions were replicated during their early working lives, from their mid-twenties they benefited from job stability and higher wages, especially in the factories where more overtime became available: by the early 1960s, one-half of Parisian factory workers were working at least 50 hours a week.<sup>11</sup> By contrast, the workers of the first cohort were already aged in the forties at the end of the Second World War, and only highly-qualified men and those capable of supervising young people, women and immigrants were promoted.

Average retirement incomes also improved for the second cohort because their pensions were indexed to wages, not to prices, because the new supplementary pensions matured, and through the extension of more generous 'executive' pensions to many technicians, foremen and supervisors – this last benefit was however mainly for men. Another important change, following the introduction of Social Security in 1945, was that more women, instead of being 'undeclared workers' (as many had been during the 1920s and 1930s on farms, in domestic service and small shops), were declared or registered as employees. This meant that their Social



Security contributions were paid and a pension entitlement was created. Household income increased even more than *per capita* pensions, because the households of the second cohort had more married women than the first. This resulted from both the increased life expectancy of men after the Second World War and the spread among women of divorce and *subsequent remarriage* (in the first cohort, divorced men were much more likely to remarry than divorced women). Finally, the second cohort amassed greater capital (or fixed assets) than the first, because there were more property owners and they owned higher value homes.

*The adjustment to retirement and life satisfaction*

The 12-year interval between the cohorts saw a considerable increase in 'life satisfaction' at the start of retirement, because the second cohort was on average more affluent, in better health and more highly educated, and a higher percentage were married. Fewer in the 1984 group when they retired said that they 'missed their job', partly because what was 'socially acceptable' had changed. In 1975, many of the men who stopped working before 65 years of age (one-half of the subjects) felt bound to explain that they were not 'idlers' but rather that they could no longer find work or were 'worn-out'. In 1987, by contrast, the men (excluding executives) who worked until 'as late as' 64 or 65 years justified their, by then, unusual commitment to paid work with remarks such as 'their boss needed them' or 'their children had not finished their studies' – as it were, to establish that they were not selfish 'job stealers'.

There were fewer retirement migrations amongst the second cohort, with just one-quarter leaving the Paris region, compared with one-third of the first. Nonetheless, the number who gave positive reasons for leaving increased, and the number giving negative reasons decreased (such as bad accommodation or a noisy or worrying residential area). More in the second cohort could choose among several places where to retire, and the proportion with two homes significantly increased: 29 per cent of the pensioners in the second cohort who did not move away from their homes in the Paris urban area – and even more of the *Ville de Paris* [City of Paris] residents – made long stays in a second residence, compared with 12 per cent of the first cohort (Cribier 1999). The progressive improvement of housing in Paris, the general rise in living standards, and a greater attachment to their neighbourhood, especially in the suburbs, enabled a higher proportion of Parisians in the second cohort to live out their retirement in both Paris and at another home elsewhere. Very few in the second cohort were forced to move away; as did reluctantly a minority of Parisians of the first cohort.

*Family relationships and responsibilities*

The family histories and relationships of the two cohorts showed marked differences. The median year of first marriages was 1931 for the first cohort and 1945 for the second. The earlier group started families during the low fertility inter-war years, whilst the following group first had children during the post-war 'baby boom'. The number of living children at the time of retirement (among men with at least one child) increased between the two cohorts from 2.20 to 2.74, and the total number of living children increased by 20 per cent over the 12 years. Childlessness decreased from 19 to 16 per cent of the men, and having at least three children spread from 30 to 42 per cent.

The subjects' relationships with their children also changed, markedly in some respects. Most working-class pensioners in the first cohort were supported and helped by their 'good children'. The help was readily accepted because they had themselves helped their own parents 30 years before. In the second cohort, however, as they began their retirement in 1987, many parents had higher income and savings than their children. The result was that although their children were equally 'good', most of the inter-generational financial flows were from the retired parents to their adult children, especially when the latter were unemployed or experiencing personal difficulties, such as divorce. Turning to the cohorts' co-residence with and proximity to their children, in both 1975 and 1987, 17 per cent of the pensioners still had one child living at home when they retired, but in 1987 fewer women than in the first cohort had already moved into a child's home (3% as against 6% in 1975). This was largely because fewer were widowed, divorced or single, but also because fewer were poor.<sup>12</sup> Despite the growth of Paris and its suburbs, more pensioners in the second than the first cohort lived near to their closest child, because on average they had more children and more of the children lived in the outer suburbs (many in the same suburb as their parents). Among the first cohort, by contrast, a larger percentage of the young pensioners lived in the *Ville de Paris* or an inner suburb, and from the 1950s to the 1970s more of their children had had to find homes far removed from their parents.

To a much greater extent than in 1975, the 1987 pensioners had at least one parent or parent-in-law alive (26% compared with 12%).<sup>13</sup> One should remember that the second cohort at first interview was two years younger, but nonetheless the principal reason was that the second cohort's parents were living much longer. The parents' incomes and Social Security entitlements had also improved noticeably over the 12 years. Many of the first cohort subjects had, from the 1950s, to support their parents financially and instrumentally, especially the widowed mothers.

The second cohort had fewer equivalent responsibilities at the same ages, but clearly will have to provide more help for the greater number of their parents who survive into advanced old age.<sup>14</sup> In 1984, images of ‘loss in old age’ were always in young pensioners’ minds, not least because during the 1980s the long-established lay model of old age as ‘senility’ was supplanted by a growing awareness of Alzheimer’s disease: its connotations were much less acceptable.

### *Survival and health inequalities*

During the lives of the two cohorts, life expectancy after retirement has increased at an unprecedented rate (Cribier 1997). In the 1981 *Ageing & Society* paper, it was imprudently predicted for the subjects who retired in 1972 that, on average, their retirement ‘will probably last 10 years for men and 15 for women’ (Cribier 1981: 15). In fact, the first cohort was the first to experience a retirement longer than childhood – neither the subjects nor the researchers knew this when the research began. The median durations of retirement (established when one-half of the cohort had died) have been 14 years for men and 20 years for women, while one-half had left school at 12 or 13 years of age. Moreover, nearly one-quarter of the women in the first cohort attained 91 years of age. Among the second cohort, the median duration of retirement among men was established in 2004 as 20 years, and it will be much higher for women.<sup>15</sup> The death rate between 65 and 74 years declined over 14 years from 40 to 32 per cent for men (a 20% decrease), and from 20 to 17 per cent for women (a 15% decrease). Since the start of their adult lives, the second cohort have had improved access to better health care; when men of the second cohort reached 50 years of age, the prevention and treatment of cardiovascular illnesses, which had high prevalence among them, had become more effective. Moreover, French doctors had finally realised the dangers of tobacco smoking and begun vigorously to counsel their patients to quit. Furthermore, alcoholism amongst men, which was widespread in French society until the Second World War, has diminished rapidly.

Has the second cohort’s increased life expectancy reduced or reinforced the differences between social classes? The increases in the higher occupational groups’ average life expectancies have been no less than that of the working class, so the differentials have been maintained (in France as in Britain, see Illsley 2003).<sup>16</sup> It is apparent that although health inequalities among the social groups in a cohort diminish with age (Cribier 2003), they are maintained up to 75 or 80 years-of-age, mainly as a result of the cultural advantages that the more educated possess.<sup>17</sup> The prevalence of arduous jobs and of less-educated subjects diminished from the first cohort

to the next. In the second cohort, only 46 per cent of men and 30 per cent of women in maturity had manual jobs, and the difference in health between 'manual' and 'non-manual' groups slightly decreased, partly because some manual workers had better working conditions, and partly because some female occupations, as with cleaning and catering assistants, were usually part-time and held by married women.

But a difficult methodological problem remains: how can we compare the objective or the self-rated health of the two cohorts three years after retirement, when the median ages of the successive cohorts decreased from 67 to 65 years, the occupational composition has changed, and a higher educational level has transformed people's own assessments of their health. The self-assessments superficially worsened, but probably were more accurate (with less non-reporting or denial): was this because the second cohort was more (or better) informed? Both between-cohort and objective-subjective health comparisons have been attempted by constituting an artificial population from the second cohort that replicates the occupational structure of the first. In the re-weighted second cohort, the men claimed to be in only slightly better health than those in the first cohort, and the women claimed slightly worse health.

The inter-cohort change in perceived health can be examined in more detail by means of the self-rated health assessments made by the first cohort subjects in 1975 and 1985, and by the second cohort subjects in 1987 and 1997 (Cribier 2003). The findings from our various studies indicate a 'health paradox', that the second cohort tended to give poorer evaluations of their health than the first, although the qualitative survey responses lead us to think that they enjoyed better objective health (and motility) than the first, at both the point of retirement and 10 years later.<sup>18</sup> Many members of the first cohort mentioned health-related limitations in response to several of the 1975 survey questions, as on shopping, access to accommodation, going out at night, holidays, their relationships with their children, and their reasons for retirement. Many also expressed health concerns in their fears of the future, as with: 'we go on walks as much as our legs allow us', 'we go on holiday for as long as we can', and 'we can still climb the stairs at the moment, but for how much longer?' Moreover, many of the subjects, especially the less-educated, were distrustful of doctors and hospitals and were reluctant to seek medical advice, as the following comments show: 'if we listened to what doctors say, we would never do anything', 'if I have to go to hospital, I'll come out in a box', and 'the doctor says that my husband has high blood pressure, but he's young, the doctor doesn't understand that my husband is a fiery man'.<sup>19</sup>

By contrast, the second cohort's responses (at the same age) to the 1987 questions referred much less often to the subjects' health and to their

difficulties with getting around. Fewer than their predecessors, of course, had awkward stairs to climb or strenuous household tasks to do, such as dragging sacks of coal up from the cellar. Above all, they referred to feeling younger: 'we look and feel younger than old people in the past; we are really much better cared-for than in my parents' time'. Both men and women were much more 'active' – going on outings, walks, holidays and to places with friends and family. They also talked a lot more about their plans, even if the fear of illness was no less ('I keep a check on myself' and 'we keep an eye on what we eat') and, more than among the first cohort, they dreaded losing their minds.

The improvement in health at the beginning of retirement from the first to the second cohort owed much to medical breakthroughs and the decrease of arduous manual occupations. What then explains the only marginal rise in the men's self-assessment of their health, and the women's overall assessment of slightly worse health? The inconsistency is best explained by a change in the way that people assessed their health. Because the second cohort was better educated, throughout their lives they have been more receptive to the benefits of medical advances (Meslé and Vallin 2002). Having received more medical treatment when they were young, this familiarisation not only promoted more informed and realistic assessments of their health but also encouraged them to use the health-care system.

## **Discussion and conclusions**

Each generation enters old age having followed specific life paths that are strongly conditioned by the social and historical contexts, and both the individual lifecourse and the societal contexts influence the duration and quality of life of each person's retirement. The most striking finding of our studies has been the marked improvement in the living standards between cohorts separated by just 12 years. The improvements of course reflect the pervasive rise in the material standards of the population in France as throughout western Europe; they were predictable gains after the long retardation of economic growth between the two World Wars and during the Second.

The incessant and strong improvement in the standard of living of people before and after retirement was particularly pronounced during the 30 'glorious years' after 1945 of sustained economic growth.<sup>20</sup> They were marked by substantial increases in the numbers of salaried occupations and of those with retirement pensions, by rapid declines in the numbers of unskilled manual workers and of 'late exits' from work (after age 65 years), and by the unprecedented prolongation of life. The

deductions from wage packets for Social Security contributions that financed the new retirement pensions were universally accepted, and public revenues grew steadily because of the increases in the employed and tax-paying populations (Blanchet 1993). The higher pensions were generally accepted at the time by the working population, who welcomed the improvement of their parents' standard of living and thought that continued economic growth, a precondition of even better pensions for themselves, was not in doubt.

The benign changes during 1950–80 eventually came to an end, and attitudes towards retired and older people, particularly those in advanced old age, began to change for the worse. For more than 20 years, although salaries and Social Security pensions continued to grow, if only very slowly, there was a marked deterioration of the worker-to-pensioner ratio; unemployment grew to 10 per cent of the active population, and workers aged in the late fifties experienced difficulties in keeping their jobs. These changes led to public policies to manage the 'inactive' workforce, and specifically the financial incentives that encouraged workers aged 55 or more years to leave the labour force.<sup>21</sup> The early retirement policies neither improved working conditions nor raised productivity: it was a 'passive (or negative) policy', while other European countries pursued more positive labour market policies (Gaullier 2003). One might add that among the international migrants, most having been in unskilled jobs from the 1950s, an increasing number chose to remain in France after retirement, but many were rewarded with poor housing, poor health and poor pensions. All these elements of economic and material reverse combined to lower the working population's expectations of their own retirement, and slowly reinforced more negative views of old age and older people.

Both gerontologists and the general public now recognise a distinction between 'early retirement' and 'true old age'. Older people are very sensitive to changes in social attitudes, and many perceive (and can loosely express) that the 'social disgrace' of dependency and of 'being a burden' that timelessly has been attached to 'poverty-stricken old people' is now applied to an increasing number and more diverse categories of older people (Feller 1998). They sense that older people are now much unappreciated *because of their age and frailty*, whatever their social class, and that the prevailing opinion today is that old people live too long and cost too much. Following the consensus during the third quarter of the 20th century that older people should share in the country's rising material standards, later decades have seen less sympathetic attitudes towards older people, particularly those with dependency on others. Never before have the regard for and the experience of older people changed so rapidly and so deeply (Feller 2005).

One telling indicator is the greatly increased resort to nursing homes amongst the oldest people. By 2000, 94 per cent of the men and 82 per cent of the women in the first cohort had died, and among them 13 and 30 per cent respectively had lived in a nursing home. By the time that all the members of the first cohort have died, the equivalent percentages are likely to be 16 and 37 per cent (Cribier and Kych 2002).<sup>22</sup> These very high percentages are unprecedented, and a cause of concern for the wellbeing of very oldest in society, especially given that there are cruelly insufficient places in well-run establishments that are capable of caring for frail older people with dignity.

As working life has shortened and as life expectancy for both men and women continues to increase, the average number of years that will be spent in an institution, already high, will increase. It is most likely that the 'new pensioners' of today will have longer retirements, and will be greater users of medical and social services (Mizrahi and Mizrahi 2005). If stagnation or even recession continues in France, and despite the anticipated productivity gains, a package of reforms becomes unavoidable: it must comprise some combination of an increase of the retirement age and a longer minimum period of contributions for eligibility to a pension that raises personal contributions. But the majority of today's Social Security contributors, despite or because of their anxieties, are not prepared to accept real reforms, however necessary to sustain the inter-generational equity that modern welfare states still pursue. To sustain the principle that citizens of all ages have the right to a decent quality of life, it is now time for social policies to be adapted to the country's aged population structure.

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### **NOTES**

- 1 Although it has been possible to track the 130 foreign-born people in the first cohort who returned to their native countries (130), they have not been surveyed. The very

- few (13) French-born subjects who retired abroad have been surveyed. For the foreign-born pensioners who remained in France in both cohorts, the information on their social origins, education and even their careers may be unreliable and is not presented here. This article focuses on those born in France.
- 2 The follow-up studies were conducted in partnership with the *Caisse Nationale d'Assurance Vieillesse* (Office of the National Pension Fund) and with the consent of the *Commission Informatique et Libertés* (Data Protection Commission).
  - 3 Among the 792 new retirees in the second cohort, there were 409 men and 383 women. In addition, there were 557 spouses (203 husbands and 384 wives).
  - 4 The 'Paris region' for the purposes of this paper is that of the *agglomération urbaine de Paris* as defined in 1982, *viz.* the City of Paris and all its suburbs. The City or *Ville de Paris* of 20 boroughs or *arrondissements* represents less than one-third of the population of the continuous built-up area.
  - 5 Furthermore, many of the men in both cohorts but very few women received professional training in the factories. The employers' policies favoured the male workforce.
  - 6 For men, the percentage reduced from 31 to 13 per cent, and for women from 69 to 47 per cent.
  - 7 The representation of female skilled workers also slightly increased.
  - 8 More formally, *Habitations à loyer modéré* (subsidised rental housing) (HLM), which was built with public subsidies.
  - 9 According to Thomson (1989), the inflation of the 1960s and 1970s was one of the advantages experienced by what he called the 'welfare generation'.
  - 10 The 1983 law enabled employees who had paid retirement contributions for 37.5 years to draw their pensions at age 60 rather than 65 years, but this benefited only 15 per cent of the 1984 cohort.
  - 11 In France, average working hours per week of all employees were 47 in 1968, 43 in 1975, and 39.5 in 1982.
  - 12 One should note that 18 per cent of the single (never married) women in the first cohort had children.
  - 13 The 1981 paper reported that only 27 per cent of the newly retired people of 1972 had had a retired father. Among the second cohort, one-half had a retired father.
  - 14 One-in-five of the first cohort of new retirees in 1975 had a parent living with them, but one-in-ten of the second cohort in 1987.
  - 15 In 2004, 20 years after their retirement, only 28 per cent of the women in the cohort had died.
  - 16 At a recent conference in Paris, Raymond Illsley explained in half an hour what he had learnt in half a century, that it is easier to increase life expectancy than to reduce health differentials among social groups.
  - 17 From the self-assessments by the first cohort in 1975, 1985 and 1995, there were marked differentials in self-assessed health among the occupational groups at the start of retirement, especially for men. With increasing age, the differentials decreased rapidly and by 85 years they had disappeared (Cribier 2003: 109, Table 4). Genetic and epigenetic factors and maybe psychic factors thus prevail over social factors. For further discussion, see Illsley and Baker (1997).
  - 18 In Britain, National Health Service general practitioners' medical assessments indicate, however, that the 'objective' state of health of successive cohorts, between 1981 and 1987, had in fact improved, as mobility did, in spite of a slightly worse self-assessment of health (Spiers, Jagger and Clarke 1996).
  - 19 An allusion to one of the 'temperaments' described by Galien (201-131 BCE), which during the early 20th century still influenced thinking and discourse about health among the less-educated in France.



- 20 During the early years of the post-war Social Security (*la 'Sécu'*) arrangements, between 1945 and 1960, pensions were low, but by the early 1970s, the average income and purchasing power of new retirees (our first cohort in 1972) began to be higher in real terms than their earnings at 20–35 years of age (our first cohort in 1937) – an unprecedented phenomenon.
- 21 The age of retirement in France is the youngest in Europe, and the rate of participation in the labour force at 55–64 years is exceptionally low (Conrad 2005: 181, Table 5)
- 22 Many of those who died during 2001–04 had entered a nursing home, while the majority of the few survivors (in early 2005) already live in an institution.

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