

Gender and wellbeing among older people: evidence from Thailand

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ABSTRACT

Researchers and international organisations frequently suggest that older women are disadvantaged in comparison with older men. This analysis of census and survey data from Thailand, however, indicates a far more complex association between gender and various aspects of ageing. Through an examination of various demographic, economic, psychosocial and health variables, it is found that older Thai women do face certain disadvantages compared to their male counterparts, including lower education and literacy, far higher levels of widowhood and living alone, and a lower likelihood of receiving formal retirement benefits. Older Thai men, however, also face relative disadvantages, including worse survivorship, a lower likelihood of receiving money from adult children, a greater probability of debt and other financial problems, and lower satisfaction with their financial situation. Many other demographic, psychosocial and economic measures are not significantly associated with gender. Our analysis provides some support for a lifecourse perspective, that relates gender differences in old age to differences in earlier life experiences, roles and reward structures, particularly access to retirement pensions and the type of support older men and women provide for their co-resident children. Marital status often mediates gender differences in wellbeing among older people. The study concludes with research and policy recommendations.

KEY WORDS – gender, ageing, Thailand, economic wellbeing, social wellbeing, health, social statistics.

Introduction

Gender differences in the experience of ageing are becoming an issue of concern to policy makers around the world. The *Plan of Action* emanating from the *Second World Assembly on Ageing* (WAA), held in Madrid in April

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2002, explicitly advocates recognising the differential impact of ageing on women and men, and ensuring that a gender perspective is integrated into all policies, programmes and legislation dealing with ageing (United Nations 2002, paragraph 8). Many researchers, non-governmental agencies and international organisations, including the United Nations, argue that older women are more vulnerable to social, economic and health disadvantages than their male counterparts (see, for example, Afzal 1996; Mehta 1997; HelpAge International 2000; Jitapunkul, Chayovan and Kespichayawattana 2002; United Nations 2002).

The general demographic argument is that because women have greater longevity worldwide, they comprise the majority of the older population and a particularly large share of the 'oldest old' (Gist and Velkoff 1997). To the extent that older populations experience greater poverty or health problems, women are thus assumed to experience a greater share of such difficulties (Mehta 1997). Also, because women have greater longevity and tend to marry men who are older than themselves, researchers have argued that older women are more likely to care for ailing spouses and to experience marital dissolution through widowhood, and are less likely to remarry (Mason 1992; Moen 1995; Afzal 1996).

Beyond mere numerical dominance, it is also often argued that older women are more vulnerable to social, economic and health disadvantages because of pervasive gender inequity in virtually all societies. Researchers from a lifecourse perspective have related the assumed relative disadvantage of older women to differences in men's and women's earlier life experiences, including different economic and care-giving roles and the different rewards they receive (Hooyman 1999). These in turn are 'shaped by various structures and relations of privilege and inequality, including those of gender' (INSTRAW 1999: ix). For instance, one United Nations (UN) *Bulletin on Aging* asserts that for women, 'lifelong oppression and discrimination reduce access to essential resources and result in higher rates of illness and poverty in late life' (Pratt 1997: 2). The *WAA Plan of Action* echoes this theme: 'For women, a life course approach to wellbeing in old age is particularly important, as they face obstacles throughout life with a cumulative effect on their social, economic, physical and psychological well-being in the later years' (United Nations 2002: 22). Unequal gender roles, for example, mean that as a growing number of younger women around the world enter the paid-labour force, their elderly mothers are increasingly burdened with caring for grandchildren, often with little compensation (Moen 1995; INSTRAW 1999).

Somewhat different but not inconsistent with the lifecourse perspective is the 'double jeopardy' hypothesis, which asserts that the negative effects of occupying two stigmatised statuses – being female and being

old – combine to make older women an especially disadvantaged group (Chappell and Havens 1980). A contrary argument, the ‘age-as-leveller’ hypothesis, postulates that gender inequality declines in old age, because physical decline and other forces deleterious to wellbeing cut across gender (Markides and Black 1995). Moreover, some factors may work to women’s advantage in old age. Because women tend to be more involved than men in homemaking and child-rearing, and to be more responsible for their children when they are growing up, older women may command greater emotional loyalty from their adult children (see Aboderin forthcoming; Wolf 1972). They may also experience greater continuity in their major roles than men, who commonly experience role disruption when they exit from paid work (Gibson 1996); and they may be more valued members in multi-generational households because of their greater contribution to domestic chores.

To understand more fully the impacts of gender on the wellbeing and support of older people and their families, research must move beyond the assumptions of universal gender inequality and of disadvantage among older women to examine the experiences of older men and women in specific living contexts. Such research should be undertaken from a comprehensive perspective which recognises that wellbeing at older ages is multi-dimensional, and that, depending on the dimension of wellbeing, gender differences may go in either direction, or for that matter not be found. Given that gender differences are likely to vary across time and setting, research should be grounded in particular social and temporal contexts. In this way investigators can more accurately represent the experiences and potential needs of older women and men, and better inform policies and programme to assist them. With these aims in mind, we provide an empirical analysis of the situations of older men and women in Thailand, a country with unusually rich relevant data. Adopting the conventional definition used in most studies of ageing and older people in Thailand (and developing countries generally), we define the older population as those persons aged 60 and more years.

Thailand’s demographic, social and economic setting

Starting in the late 1960s, Thailand experienced a rapid and extensive decline in fertility as well as a substantial increase in life expectancy. By 2000, average life expectancy at birth was close to 70 years, and the total fertility rate was below two children per woman (United Nations 2001*a*). Since, however, most of the current older Thai population established their

families when fertility was much higher, they commonly have numerous adult children, *e.g.* in 1995 Thais aged 60 and more years had on average 5.3 living children, and only 15 per cent had two or fewer (Chayovan and Knodel 1997). Driven primarily by fertility decline, the share of the Thai population aged 60 and more years rose from 5.5 to 9.5 per cent between 1980 and 2000 and, according to UN projections, will reach a quarter of the population shortly after 2040 (Chayovan, Knodel and Siriboon 1990; National Statistical Office, Thailand (NSO) 2002*a*; United Nations 2001*b*).¹ Although the population ageing trend differs little by gender, women have an older age structure. For example, the 2000 census indicated that 10.3 per cent of women compared to 8.7 per cent of men were aged 60 or more years, and women comprised the majority (55%) of the older population.

Mortality improvements at older ages are contributing to the ageing of the older population itself. UN projections indicate that people aged 75 and more years will form a steadily increasing share of all older Thais, and that the trend will be more pronounced among women than men. In addition, for any given year, in the older population the ratio of women to men increases with increasing age. The gender mortality differential and the gender imbalance it creates have important implications for the well-being of older people in Thailand, especially with reference to the losses and disruption of widowhood.

The Thai population is relatively homogeneous in its cultural aspects, with the vast majority being ethnic Thais who speak some form of the Thai language, and about 95 per cent being Buddhists (typically of the Theravada branch). A particularly influential ethnic group is the Chinese and Thai-Chinese, who are disproportionately concentrated in the urban areas. About four per cent of the older population identify themselves as Chinese, and another nine per cent as mixed Thai and Chinese (Chayovan and Knodel 1997). Those among this minority who still identify strongly with their Chinese heritage tend to be patrilineal and patrilocal, while ethnic Thais traditionally favour bilateral descent and inheritance and matrilocal residence (Henderson *et al.* 1971; Mason 1992). A preference to live with a married daughter rather than a married son is especially strong in the areas coterminous with the northeast and northern regional dialects (Knodel, Saengtienchai and Sittitrai 1995). Thais are relatively flexible in this matter, however, for many live with a son if no daughter is available (Knodel, Chayovan and Siriboon 1992*a*). Children typically inherit equally, except that the one who stays with the parents commonly gains the house and perhaps an extra share of the land, a custom which generally favours women given the tendency towards matrilocal residence.

Respect for seniority has been an integral part of Thai culture. These values have probably changed in recent decades, especially in their expression, but systematic evidence of such change is still lacking. As in other Southeast Asian societies, the family traditionally takes the primary responsibility for older people in Thailand. A prevalent norm of filial obligations to parents underlies the existing system of inter-generational relations (Knodel, Saengtienchai and Sittitrai 1995). Parents, however, also typically feel a continuing obligation to ensure their children's well-being, and inter-generational exchanges of support and services remain pervasive in Thailand, as in much of the developing world (Knodel *et al.* 2000; World Bank 1994). The living arrangements of older-aged parents and adult children are closely linked to this system of support exchanges. A vast majority of older Thais either live with or very near to at least one of their adult children.

Turning to the country's economic situation, according to the World Bank's classification, Thailand is among the lower-middle income nations. During much of the last several decades, Thailand experienced rapid economic growth, but that ended with the Asian economic crisis in mid-1997, which affected Thailand and many other countries. As of 2003, Thailand had achieved only partial recovery.

Gender and ageing in government policy

Thai government agencies are aware of the rapid ageing of the population, and interest in gender issues has grown recently among policy makers, partly in response to recent campaigns by the UN and other international and donor agencies. Nonetheless, gender and ageing issues are rarely linked in Thai government policies. The equality of men and women in Thailand and the recognition of the rights of older persons are both incorporated in the current constitution (adopted in 1997), which explicitly states that 'men and women have equal rights' and bans discrimination against individuals on the grounds of age. The constitution also specifies that 'persons aged over 60 who have insufficient income on which to live have the right to receive help from the State'. In government policy, older people are usually grouped with other segments of the population that are viewed as 'disadvantaged' and having special welfare needs, such as the poor or the disabled. The *Second Long-Term Women's Development Plan* (1992–2011) recommends that older women be given special attention with respect to health and welfare services, in recognition of their increasing number as the population ages. It also calls for a campaign to help women prepare for old age by increasing their self-reliance.

Long-term plans for older people in Thailand were formulated first in 1986 by a special National Committee for the Elderly in response to the 1982 World Assembly on Ageing, and again in 2002, partly in preparation for that year's World Assembly on Ageing (Jitapunkul *et al.* 2002). Both plans deal with policies and strategies related to health, education, income, employment, social and cultural issues, and social welfare – but all are treated in a gender-neutral manner. The *Ninth Five Year Plan* (2002–2006) for national development refers to the mandate for gender equality in the constitution, and specifies the expansion of the old-age security fund and increasing its efficiency in anticipation of the future ageing of Thai society (National Economic and Social Development Board, Thailand (NESDB) undated-a). No linkages are evident, however, between gender and ageing policy in the plan.

In 1993 the Department of Public Welfare started a programme to provide monthly subsistence allowances for indigent old people in rural areas. Subsequently, the allowance has been increased from 200 to 300 Baht (about US \$7–8), and the budget increased to allow coverage of approximately 400,000 people nationwide (Knodel *et al.* 2000; personal communication from the Department of Public Welfare). The programme operates in almost all villages and the total number of recipients may exceed 400,000, since funds from the Department of Public Welfare are sometimes supplemented by the local agencies that administer the programme. Gender is not explicitly taken into account in designating recipients, although it is probably correlated with some of the key criteria used in designating recipients.

Most government health benefits are equal for older Thai men and women. In 1989, the Ministry of Public Health established a free medical care programme for disadvantaged older people that has been extended to cover all aged 60 and more years. Starting in 2001, a new plan for low-cost health coverage for the general public was introduced that permits access to most services at government health facilities for a small fee per visit (30 Baht, less than US \$1). Older people continue to be entitled to free services for most health problems. Thai government and state enterprise employees and their spouses, parents and children are entitled to health insurance benefits that are superior to those now planned or available to the general public (Tangcharoensathien, Supachutikul and Lertiendumrong 1999). These benefits continue after retirement if the employee opts for a pension instead of a lump-sum payment. Moreover, older people can benefit either as parents or spouses of a currently employed or a retired civil servant (who chose the pension plan), although these health benefits end at the death of the primary beneficiary. Because about 60 per cent of government employees are men (NSO 2002 *b*), fewer older women have these

health benefits through primary coverage, although the potential for gender inequality is mitigated by women's ability to benefit as spouses or parents of civil servants.

Two major government-sponsored plans provide retirement benefits in Thailand: a long-standing (but changing) scheme that covers government and state enterprise employees, and a more recent plan under the *Social Security Act* that covers employees in private enterprises (Phananiramai and Ingpornprasit 1994). Because men comprise the great majority of government employees, they have some advantage over women for retirement benefits as well as health benefits. Still, this potential advantage is reduced because women are eligible to share in retirement benefits as spouses and widows of retired government employees.² More important than the gender disparities, however, is the fact that so very few older Thais, men or women, are currently entitled to any retirement income payments.

In 1998, an extension of the 1990 social security scheme created a pension fund for employees in private enterprises. Because the entitlement to full old-age benefits is limited to employees who have contributed for at least 15 years, this scheme will not benefit the current older population. Also, the benefits are inferior to those provided by the civil service and state enterprise retirement plans. As of June 2002, 6.7 million workers were insured by the scheme, and figures for the end of 2000 indicate that almost half (48%) of those covered are women. Presumably, therefore, older men and women will benefit more or less equally from the private enterprise social security scheme. To the extent that women face gender discrimination in the labour force over the lifecourse in terms of promotions and earnings, and given that payments are related to earnings, the pensions paid to women will on average be less than those paid to men.

Data and methods

For our analysis we draw on three national data sets: a one per cent sample from the 2000 Thai census, the 1995 *Survey on the Welfare of the Elderly in Thailand* (SWET), and the 1994 *National Survey of the Elderly in Thailand* (SET). Together these three sources provide systematic empirical evidence about gender and older people on a range of key issues: demographic and socio-economic characteristics, living arrangements, support received from and given to children, labour-force participation, economic wellbeing, social and psychological wellbeing, and health. The most detailed source is the 1995 SWET, which drew a national probability sample of people aged 50 and more years living in private households. The analyses

TABLE 1. *The marital status of the Thai population aged 60 and more years by age and sex, 2000*

Sex and age groups (years)	Single	Married	Widowed	Divorced/ separated	Married, but status unknown	Monk
<i>Percentages</i>						
Male						
60–64	2.0	86.0	8.4	1.5	0.4	1.6
65–69	1.8	82.0	12.0	1.3	0.6	2.4
70–74	1.4	75.4	18.1	1.3	1.0	2.7
75–79	0.9	69.7	24.0	1.5	1.1	2.8
80–84	0.7	62.9	31.0	1.4	2.0	2.0
85+	1.3	50.6	42.3	0.5	2.1	3.2
60+	1.7	79.0	15.0	1.4	0.8	2.2
Female						
60–64	3.9	65.0	27.2	2.7	1.2	–
65–69	3.4	56.0	36.7	1.9	2.0	–
70–74	2.5	45.1	48.6	1.8	2.0	–
75–79	2.3	35.8	58.0	1.3	2.6	–
80–84	1.6	25.5	68.4	0.8	3.8	–
85+	1.3	21.2	73.6	0.6	3.4	–
60+	3.1	51.4	41.6	1.9	2.0	–

Source: Population census of Thailand 2000, one per cent sample.

Notes: All tabulated figures are percentages, and all rows total 100 per cent. Tabulations exclude the 0.3 per cent of the population aged 60 and more years whose marital status is unknown.

have been limited to the almost 4,500 respondents who were at least 60 years old. The 1994 SET was conducted by the National Statistical Office and also covered the population aged 50 and more years. The presented findings again focus on the almost 8,000 respondents who were aged 60 years and over. Details of the methodology and samples of surveys are provided elsewhere (Chayovan and Knodel 1997; NSO no date). It is important to recognize that the SET and SWET surveys both exclude people who were living in institutions, such as monks and nuns. Given the sizeable proportion of older males who are monks, these omissions need to be kept in mind when interpreting results for older Thai men.

Demographic and socio-economic characteristics of older Thais

Table 1 shows the marital status of older Thais by age and sex in 2000. Widowhood is far more prevalent among older Thai women (42%) than men (15%), and a far higher proportion of men than women are married. These complementary patterns result from the tendency of Thai men to marry younger women, who tend to out-survive them, and a greater

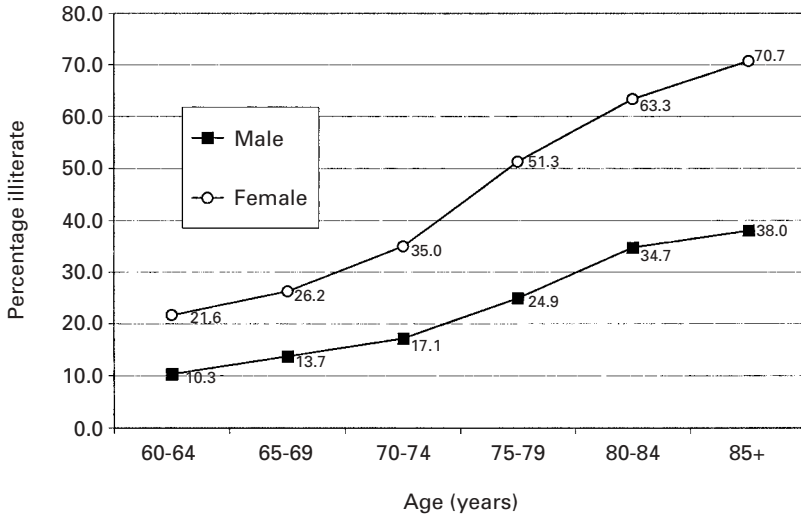


Figure 1. Illiteracy rates of older people in Thailand by age-group and sex.
 Source: 2000 Census of population of Thailand, one per cent sample.

tendency of older men than older women to remarry.³ The proportion of older women who are single is slightly higher than for older men. This is, in part, an artefact of the Thai census classification of men who are Buddhist monks as a separate marital status category. Although all monks live without spouses, some have never married while others are divorced, widowed or, for a few, legally married but living separately from their wives. Since a sizable proportion of older males are Buddhist monks and had never married, the census under-estimates this marital status among older men. The census does not identify Buddhist nuns as a separate category, but it is clear that they constitute only a tiny proportion of older women (Knodel *et al.* 2000).

The literacy of the Thai population has improved rapidly over the past decades. In 2000 the illiteracy rate among Thais aged 85 and more years was 58 per cent, compared with only 16 per cent among those aged 60–64 years. Figure 1 reveals a substantial gender gap in literacy among the older population. Far more women than men are illiterate in every age group, but the gap narrows for each successively younger cohort, reflecting the long-term trend for diminishing gender differences in education. In Thailand, as elsewhere, labour force participation generally declines as people approach the retirement age and experience declining health or physical strength. According to the 2000 census, only 45 per cent of Thais aged 60 or more years were employed in the previous year. As Figure 2 shows, labour force participation rates fall with increasing age. For every

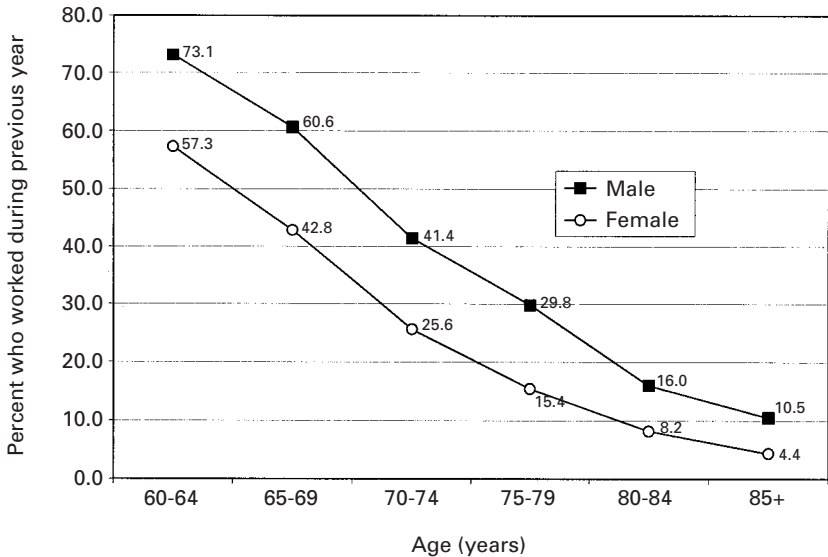


Figure 2. Labour force activity rates of older people in Thailand by age-group and sex.
Source: 2000 Census of population of Thailand, one per cent sample.

age group, however, women are less likely than men to have been active in the labour force in the previous year.

Living arrangements

A central feature of family support for Thai older persons is co-residence with one or more adult children. Such arrangements often meet the needs of both generations. Although co-residence is only possible for those who have living children, this is a rare limitation today. According to the 1994 SET, only 2.5 per cent of men and 4.4 per cent of women aged 60 and over had no living biological, adopted or step-children. The 1995 SWET indicates slightly higher levels: 3.0 per cent of men and 5.5 per cent of women. Thus although the vast majority of Thai older persons have living children, men may be slightly more favoured in this regard. Since both surveys are limited to private households and therefore exclude monks – many of whom are childless – the gender difference in childlessness in the overall older population may be even smaller than the surveys indicate.

Table 2 shows several measures of the living arrangements of older men and women derived mainly from SWET and SET data. Although very few Thai older people live alone, and only a low proportion live only with their spouse, some gender differences are apparent. All three sources

TABLE 2. *Living arrangements of people aged 60 or more years in Thailand by gender and marital status*

Measure	Total		Currently married		Non-married	
	Men	Women	Men	Women	Men	Women
	<i>Percentages</i>					
Living alone:						
Census 2000	4.8	6.9***	1.4	2.1***	18.3	12.5***
SWET 1995	2.9	5.5***	0.8	0.5	13.1	9.6
SET 1994	2.1	4.8***	0.6	0.4	10.0	9.1
Living only with spouse:						
Census 2000	16.0	9.8***	20.0	18.2***	n.a.	n.a.
SWET 1995	14.5	9.7***	17.5	21.6**	n.a.	n.a.
SET 1994	14.6	9.1***	17.5	18.6	n.a.	n.a.
Co-resident with a child:						
SWET 1995	72.7	69.4*	72.1	68.0*	75.7	70.6
SET 1994	72.8	72.7	72.1	70.2	76.6	75.1
Co-resident with or living next to a child (SWET 1995)	82.3	78.8*	82.4	79.2*	81.6	78.4
Co-resident with or seeing a child daily (SWET 1995)	87.8	84.3**	88.4	87.2	84.8	82.0
Co-resident with ever-married children:						
<i>Any ever-married child</i>						
SWET 1995	47.0	53.8***	44.3	49.3**	60.1	57.4
SET 1994	44.5	53.1***	40.7	46.2**	63.5	59.6
<i>An ever-married son (SWET 1995)</i>	19.6	19.6	19.2	17.8	21.8	21.0
<i>An ever-married daughter (SWET 1995)</i>	31.0	36.2***	29.0	32.8*	40.8	39.0

Sources: Census of population 2000, one per cent sample, 1995 *Survey on the Welfare of the Elderly in Thailand* (SWET), and the 1994 *National Survey of the Elderly in Thailand* (SET). For details see text.

Notes: All significance statistics refer to differences between men and women (in the described category). Results in parentheses are based on less than 20 unweighted cases. n.a. not applicable.

Significance levels: * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$.

indicate that living alone is more common among women than men, and that the reverse is true for living only with a spouse. These differences appear to be largely a function of marital status. Only negligible differences in these two measures are apparent between married older men and women, but among the non-married, living alone is actually more common among men.

A common if narrow measure of co-residence is the percentage of older people who live in the same household with one or more of their children. According to both surveys, a substantial majority of older persons in Thailand co-reside with a child, and gender differences in this respect are minimal.⁴ Examination of literal co-residence, however, fails to capture the full extent of inter-generational living arrangements. Living in nearby dwellings provides many of the benefits of literal co-residence while providing greater privacy, and such situations are common in Thailand,

especially in rural areas (Cowgill 1972; Knodel and Saengtienchai 1999). Data from the 1995 SWET show the percentage of older people who variously co-reside, live adjacent to a child, and co-reside *or* see a child daily (implying nearby residence) (Table 2). Both the broader measures show that the vast majority of old-age parents either co-reside with a child, live adjacent or have daily contact. Gender differences are minimal, although the percentages co-resident and in daily contact were slightly higher for men than women, which is attributable to the slightly higher percentage of women who had no living children.⁵

Co-residence with ever-married children reflects the mature stage of inter-generational living arrangements, that applies after single children, many of whom depend on rather than support their parents, leave the household. Both the SWET and SET data indicate that older women (in general and those who are married) are slightly more likely than men to live with an ever-married child, while the reverse is true among non-married older people. Many more older Thais live with an ever-married daughter than an ever-married son.⁶ There is little difference between older men and women in the tendency to live with a married son, but women (overall and married) are somewhat more likely than men to live with a married daughter.

In societies in which co-residence with adult children is the norm, older people who live alone or with only a spouse are sometimes assumed to be deserted by their families, and some government welfare programmes target them (*e.g.* NESDB undated-b; Vietnam Office of the Prime Minister 2002). Such living arrangements also arise from a desire for privacy that benefits both generations. Focus group discussions reveal that some Thai older people prefer living separately from their children, especially if they are in good health (Knodel, Saengtienchai and Sittitirai 1995). Evidence from SWET shows that older people who live alone or only with a spouse often live very near a child, *e.g.* 53 per cent of those who live alone and 60 per cent of those who live only with their spouse see a child daily; the percentages are even higher (61% and 65%) if childless older people are excluded (results not shown). Moreover, results from both surveys (not shown) indicate that older Thais who live alone or with a spouse are no more likely than others to indicate dissatisfaction with their economic situation or to perceive their income to be inadequate.

Both the surveys included questions on the degree of satisfaction older people have with their living arrangements. Given their attitudinal nature, we exclude responses by proxies.⁷ As the results from SWET indicated, Thai older people who live alone are far more likely than those who do not (with only minor gender differences) to say they had felt very lonely during the past year or that their household lacked a feeling of warmth (Table 3).

TABLE 3. Satisfaction with living arrangements and related psychological wellbeing by gender and marital status, persons aged 60 and more years

	Total		Currently married		Non-married	
	Men	Women	Men	Women	Men	Women
<i>Percentages</i>						
Among those living alone:						
Very lonely (SWET)	34.5	31.1	–	–	32.7	32.2
Feeling household lacks warmth (SWET)	20.4	24.1	–	–	22.6	23.9
Indicating it was a problem (SET)	21.9	20.8	–	–	29.2	21.5
Among those living only with a spouse:						
Very lonely (SWET)	10.4	13.3	10.4	13.3	n.a.	n.a.
Feeling household lacks warmth (SWET)	4.0	6.1	4.0	6.1	n.a.	n.a.
Who have problems or arguments with other household members (SWET)	27.8	22.7	27.8	22.7	n.a.	n.a.
Very satisfied with living arrangement (SET)	65.2	65.1	65.2	65.1	n.a.	n.a.
Among all those living with others (including only with a spouse):						
Very lonely (SWET)	8.4	13.1***	8.1	10.0	10.6	16.0*
Feeling household lacks warmth (SWET)	2.1	3.9***	1.7	3.0	4.4	4.8
Who have problems or arguments with other household members (SWET)	26.6	23.3*	28.2	25.7	17.5	21.2
Very satisfied with living arrangement (SET)	72.1	72.7	73.2	75.1	64.8	70.0
Among those living with 1 + child:						
Feel happy, warm and comfortable about it, <i>i.e.</i> agree with all three items (SET)	95.0	92.9	95.9	94.6	89.6	91.4
Who feel dwelling is too small (SET)	9.7	11.6	10.1	10.8	7.6	12.4*
With at least 1 of 5 possible complaints about relations with others in household (SET)	22.0	23.3	21.4	19.5	25.2	26.9

Source: 1995 SWET and 1994 SET, as indicated for specific variable. For details see text.

Notes: Results exclude cases of proxy respondents. – insufficient cases. n.a. does not apply.

Significance levels (male-female differences): * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$.

Still, SET data indicate that only about 20 per cent of older people who live alone viewed living alone as a problem, with little difference between men and women. This low percentage may reflect the finding cited above that many older people who live alone have an adult child living nearby.

In comparison to older people who live with others (including a spouse), those living solely with a spouse are only slightly more likely to report feeling very lonely, feeling their household lacks warmth, or having problems or arguments with household members, and are only a little less likely to report being very satisfied with their living arrangement. None of the gender differences in these comparisons are statistically significant. Among all Thai older people who live with others, men are slightly more likely than women to report problems or arguments with other household members, and women are somewhat more likely than men to report feeling very lonely or feeling their household lacks warmth. This holds regardless of

marital status, although the percentages are small among both the married and non-married. Almost three-quarters of older people living with others said that they were very satisfied with their living arrangements, with virtually no difference by gender. Within the marital status categories, however, women are slightly more likely to be very satisfied than men, although the differences were not statistically significant.

Respondents in SET who co-resided with a child were asked whether they felt warm, happy, and comfortable living with their child. As Table 3 shows, the vast majority of Thai older people responded positively with respect to all three feelings, with little difference by gender. Respondents who co-resided with a child were also asked if they felt their dwelling was too small for the whole family. Only a small minority reported affirmatively, although women, especially non-married women, were somewhat more likely than men to say so. Finally, respondents who co-resided with a child were asked about five possible complaints regarding this arrangement: Is the household hectic? Do their children obey? Do their children complain? Do their children take care of them? Are there problems with a child-in-law? Less than a quarter of the respondents reported any of these complaints, with little difference between men and women.

In sum, there appear to be considerable similarities between older Thai men and women in several potentially important aspects of living arrangements. The most pronounced difference, driven mainly by gender differences in marital status, is that women are more likely to live alone while men are more likely to live only with a spouse. Little gender difference is apparent in satisfaction related to living arrangements. Nevertheless, since older women were more likely than older men to live alone and living alone is associated with higher levels of feeling lonely or a lack of warmth in the household, a small share of older women may be at a disadvantage. Overall, though, most older Thai men and women appear satisfied with their living arrangements, a matter that is clearly of crucial importance to them (Knodel, Saengtienchai and Sittitrai 1995). Although the respondents may have been reluctant to express negative views about living arrangements, even if this were so and strong gender differences in satisfaction existed, some contrast between the responses of men and women should have remained.

Provision of support by older people

The system of inter-generational exchange in Thailand involves two-way flows of material support and household services between older parents and their adult children. As Table 4 indicates, regardless of marital status,

TABLE 4. Support provided to adult children, by gender and marital status, persons aged 60 years and over

Form of support	Total		Currently married		Non-married	
	Men	Women	Men	Women	Men	Women
	<i>Percentages</i>					
Provision of money during last year:						
Of those with at least one child, percentage who gave any child money	43.3	27.4***	45.4	31.7***	32.3	23.6***
Of those with at least one non co-resident child, percentage who gave any non co-resident child money	30.6	20.0***	31.6	24.1***	25.8	16.3***
Provision of food/clothing/goods during last year by those with at least one non co-resident child:						
Gave any non co-resident child food, clothing or personal belongings	41.0	39.3	43.2	48.2*	29.9	31.4
Provision of housing to co-resident child by respondent or spouse:¹						
Those with at least one adult child	67.1	57.4***	87.8	61.7**	63.9	53.6***
Those co-resident with an adult child	89.2	78.0***	91.5	89.6	79.0	69.2**
Provision of services among co-resident older people:						
<i>Did the following at any time during the previous week:²</i>						
Shopped for food	40.0	59.0***	39.7	73.3***	41.2	48.4*
Prepared meal(s)	34.0	61.1***	34.1	71.8***	33.1	52.9***
Did laundry	43.3	63.1***	42.5	72.1***	47.1	56.1**
Cleaned house	47.4	64.0***	47.2	70.7***	48.5	58.7**
Cared for children < 10 years old	71.5	83.8***	72.2	88.7***	68.1	79.8**
Watched the house/shop	84.4	93.7***	82.7	93.6***	91.4	93.8
<i>Was the main person responsible for the following:²</i>						
Shopping for food	7.7	28.4***	7.6	38.1***	8.1	20.8***
Preparing meal(s)	6.1	31.1***	5.4	40.1***	9.1	24.2***
Doing laundry	6.5	22.6***	5.4	28.1***	11.0	18.3***
Cleaning house	6.2	27.1***	6.1	32.2***	6.7	23.2***
Caring for children < 10 years old	18.2	51.5***	16.6	56.0***	25.4	47.7***
Watching the house/shop	52.9	81.7***	47.7	75.2***	76.4	86.7***

Source: 1995 SWET.

Notes: 1. This category includes those older people and/or their spouses (if any) who owned the house at the time or who already had given the house fully to their children. Those who had partially given their house to their children are treated as not providing housing. 2. These variables include only those older people living in households reporting that someone in the household performed the given household chore.

Significance levels (male-female differences): * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$.

elderly fathers were much more likely than elderly mothers to have given their children money during the previous year. Married older people were more likely than their non-married counterparts to report giving money to their children, which may reflect the fact that the combined income of married couples was usually higher than that of non-married respondents. About the same proportion of men and women reported that they provided food, clothing or personal belongings to their non co-resident

children in the previous year, although among the married, mothers were significantly more likely than fathers to have done so. Given that co-residence between older age parents and adult children is common, and that most older Thais (or their spouses) own the house in which they live, provision of housing is a common form of support to adult children. In addition, as they age, some parents transfer the ownership of the home to their children. Well over half of all respondents or their spouses provided housing for at least one adult child, a more common practice among men than women. The percentages are considerably higher among respondents who live with at least one adult child, but the gender differences are similar.

Many older people who co-reside with adult children provide diverse assistance with household chores, including shopping for food, preparing meals, doing laundry, cleaning house, caring for grandchildren, and minding the house when others are not at home. Table 4 shows that significant proportions of both older men and women reported these chores, although older women were considerably more likely to do so than older men. In some situations the elderly parent, particularly the mother, was the primary person doing these services for the household. The gender difference in assistance with household chores holds both for married and non-married old age parents. The higher levels of household assistance reported by married women compared with non-married women may reflect their younger average age. Higher assistance levels were not found among married men, however, although they were considerably younger than non-married men. These results suggest that elderly mothers and fathers provide considerable assistance to their adult children. While fathers were more likely than mothers to provide money or housing, more mothers provided non-monetary material assistance and, especially, everyday household services. That both mothers and fathers provided support for their adult children probably accounts for the rarity of pronounced gender differences in the support received by parents from their adult children, as discussed below.

Sources of income and support

As elsewhere in the developing world, older people in Thailand draw on various sources of support, including self-support through work, familial support – particularly from adult children – and formal pensions and welfare benefits. The importance of these sources is likely to vary by gender and age. The two surveys contain considerable information on an array of income sources, as well as measures that enable us to judge the respondents' views of their net adequacy.

TABLE 5. *Work status and receipt of formal sources of support, by gender and marital status, people aged 60 and over*

	Total		Currently married		Non-married	
	Men	Women	Men	Women	Men	Women
<i>Percentages</i>						
Work status:						
Working last year:						
Based on SWET	57.8	37.1***	62.4	45.9***	35.3	29.9*
Based on SET	51.2	30.8***	54.8	40.6***	33.2	21.4***
Of those currently married, % with spouse who worked last year (SWET)	59.3	54.0**	59.3	54.0**	n.a.	n.a.
Investment and savings:						
Receiving income from savings, interest, rent, investments (SET)	20.3	16.4***	21.2	18.0**	15.7	15.0
Retirement income:						
Receiving a pension (SET)	7.2	1.7***	7.8	2.4***	4.1	1.0***
Of those ever employed (SWET):						
Receiving or expecting to receive a pension	16.1	4.3***	16.9	5.4**	11.5	3.7*
Receiving or expecting to receive a pension, monetary compensation, or lump sum payment (SWET)	34.9	7.6***	36.6	8.9***	24.6	6.8***
Welfare payments:						
Living in households receiving monthly government allowances for older people (SWET) ¹	1.4	2.0	1.7	1.1	0.3	2.8**

Source: 1995 SWET; and 1994 SET, as indicated for specific variable.

Notes: 1. This variable omits respondents who were interviewed by proxy. n.a. does not apply.

Significance levels (male-female differences): * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$.

Work and formal sources of support

A substantial proportion of older people contribute to their own support through working (Table 5). Although the reported levels of economic activity among older people differed modestly by survey or census, all three sources consistently showed substantially higher levels of working during the previous year for older men than for women.⁸ This gender difference persisted when controlled for marital status, although both married men and women were more likely than their non-married counterparts to have worked during the previous year. Given that the non-married were substantially older on average than the currently married, the marital status difference partially reflects the decline of economic activity with age.⁹ In contrast, among currently married older persons the gender differences in the percentage whose spouse worked last year were modest (SWET data). Older men were somewhat more likely than older women to have a spouse who worked, primarily because older men tended to have wives

substantially younger than themselves, while older women tended to have husbands who were older.¹⁰ As a result, although at any given age men were more likely to work than women, the decline of economic activity with age led to a higher percentage of married men than married women reporting that their spouse worked in the previous year.

Besides actively working, older men and women contributed to their own support through investments and savings. Men were somewhat more likely than women to have received income from savings, interest, rent or other investments. The difference, however, was modest and partly arose from marital status differences. Among the non-married, the percentages of men and women with such income were almost identical. In contrast, older men were much more likely than women to receive (or to expect to receive) formal retirement income. While both married men and women were somewhat more likely than their non-married counterparts to receive a pension, gender differences were equally pronounced for both groups. Among ever-employed respondents (excluding the self-employed, such as most farmers), over a third of older men compared with only eight per cent of older women reported either receiving or expecting to receive a pension, monetary compensation, or a lump-sum payment in association with employment. Equally striking is that these gender differences persist when controlled for marital status. These gender differences in pensions and retirement payouts reflect the historical tendency for more Thai men than women to be employed in the civil service, and thus to have access to pensions and other retirement payments. Only a very small proportion of older Thais reported to SWET in 1995 that they lived in households that received a monthly government allowance for older people (reflecting the incipient stage of the programme at the time). No significant gender differences in receipt of these payments were apparent for the total or currently-married population, although non-married women were significantly more likely than non-married men to live in such a household. As noted in the discussion of government policy, the programme has expanded substantially since the time of the survey, but no information is available on current gender differences among the recipients.

Family support

Informal support from the family, particularly from adult children, is another key economic resource for older people in Thailand. As Table 6 shows, few older Thais in either survey reported receiving money from relatives other than children. The lower percentages found in SWET reflect its more restrictive question, which referred to the receipt of at least 1,000 Baht (about US \$38 in 1995) from relatives other than children

TABLE 6. Receipt of informal familial support, by gender and marital status, persons aged 60 and over

	Total		Currently married		Non-married	
	Men	Women	Men	Women	Men	Women
<i>Percentages</i>						
Among all older persons:						
Received at least 1,000 Baht last year (SWET):						
From relatives living outside of household	5.7	7.0	5.4	4.8	7.5	8.7
For whom children or relatives fully or substantially provided for the household	49.2	68.3***	43.2	51.4	78.7	82.0
For whom children or relatives fully or substantially paid household expenses	40.1	59.9***	33.0	42.0***	74.9	74.4
Received money last year from relatives (SET)	9.4	12.9***	7.7	7.5	18.2	18.1
Among older people with at least one child:¹						
Received money from a child last year:						
Based on SWET	86.0	87.9	85.6	86.3	88.1	89.3
Based on SET	82.8	91.6***	81.8	89.9***	89.0	94.4***
Received at least 1,000 Baht last year from at least one child (SWET)	68.7	68.3	69.1	66.5	65.6	69.8
Received housing from a child (SWET) ²	3.5	9.1***	1.8	2.7	12.1	14.7
Among older people with at least one child living outside the household (SWET):						
Received any money from a non co-resident child last year	80.9	84.3**	81.1	83.6	79.6	84.9*
Received food, clothes or personal belongings from a non co-resident child at least monthly	56.1	59.1	57.5	60.8	49.4	57.6**

Source: 1995 SWET and 1994 SET, as indicated for specific variable.

Notes: 1. For SWET, tabulations refer to older people with at least one adult child. 2. Children whose parents had given them their house fully or partially are treated as not providing housing.

Significance levels (male-female differences): * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$.

outside the household. The equivalent SET question referred to any amount from relatives regardless of where they lived. Although both surveys also showed that older women were generally more likely than older men to receive monetary support from relatives, this is a function of the greater tendency for non-married than married older people to receive such support, and of the higher percentage of women among the non-married. Within marital status groupings, gender differences were negligible.

Two questions in SWET solicited information about the role of others besides the respondent and spouse in providing support for the household. One asked who was the main provider for the household; the other asked who was responsible for the main expenses of the household.¹¹ Presumably the first question is broader as it would include the provision of both supplies, *e.g.* food from agricultural activity, and any money needed to cover household expenses. Children or relatives were important in a sizable share of cases for helping to support the households of older persons

(Table 6). Although the reported percentages of family members (other than spouse) contributing to expenses is somewhat lower than the percentages contributing to household support, the marital status and gender patterns are very similar for both variables. Non-married older people were far more likely than the married to have family members play a significant role in household support. Overall, older women were considerably more likely than men to have other family members fully or substantially support their household and its associated expenses – an effect of gender differences among married older persons. Among the non-married, three-quarters or more of both men and women reported that children or relatives played a major role in providing for the household, and little gender difference is apparent. The gender difference among married persons may reflect the substantially older average age (and reduced physical abilities) of the husbands of older married women compared to the far younger wives of older married men.

Table 6 also shows that the vast majority of older Thai parents receive monetary support from their children. Only results from SET indicate statistically significant gender differences, with older women more likely to receive money from their children than men. In some cases, the amounts children gave are small and primarily symbolic, and were unlikely to make much impact on their parents' material wellbeing. As results from SWET show, however, more than two-thirds of older parents reported receiving at least 1,000 Baht during the previous year,¹² with little difference by marital status or by gender in either marital status group.

About 80 per cent of older Thais live in homes owned either by themselves, their spouse, or jointly with their spouse (results not shown), but a small percentage live in houses that have been entirely purchased and are owned by an adult child, who typically lives with the parents (Table 6). Whether or not the child co-resides, the child can be considered as providing housing for the parent. Older women were significantly more likely than older men to receive housing from their children, and the non-married much more likely than the married. In each marital status grouping, gender differences were small.

Transfers of money between parents and adult children within a household may be for household expenses incurred by all members and not necessarily for the recipient's own use. This is less likely when money comes from non co-resident children, who clearly play a vital role in providing material support.¹³ More than 80 per cent of older people with at least one non co-resident child reported that they received money from such a child in the year preceding the survey, with women slightly more likely than men. The gender difference persisted in marital status categories and remained statistically significant among non-married older

TABLE 7. Main source of income, by gender, marital status and age, persons aged 60 and more years

Main source of income	Total		Currently married		Non-married	
	Men	Women	Men	Women	Men	Women
	<i>Percentages</i>					
Based on SWET:						
Own work (or with spouse)	38.7	19.9***	42.4	24.2***	20.7	16.4***
Spouse	5.9	9.2	7.1	20.4	—	—
Children	40.0	55.5	36.1	45.4	59.4	63.7
Other relatives	3.0	8.4	2.1	2.5	7.5	13.1
Own savings/interest/rent	5.1	3.8	5.0	3.3	5.8	4.3
Pension/lump sum retirement	4.2	0.8	4.7	0.8	1.4	0.7
Other (combinations of preceding categories and unknown)	3.1	2.5	2.7	3.4	5.2	1.8
Total	100	100	100	100	100	100
Based on SET:						
Work	42.9	21.3***	46.4	28.9***	25.0	13.9***
Spouse	2.4	6.2	2.9	12.4	—	—
Children	41.8	62.6	38.3	52.4	59.2	72.4
Other relatives	1.3	3.3	0.4	0.6	6.0	5.9
Savings or interest	1.9	1.5	2.1	1.2	0.8	1.8
Pension	6.3	2.0	6.8	1.9	4.0	2.0
Other (includes not specified)	3.5	3.2	3.2	2.6	5.1	4.1
Total	100	100	100	100	100	100

Source: 1995 SWET and 1994 SET, as indicated for specific panel.

Significance levels (male-female differences): * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$. The statistical significance refers to the full sample and the chi-squared statistic.

people. Over half of older people with at least one non co-resident child reported receiving material support at least monthly in the form of food, clothing and personal belongings. On average, women were slightly more likely than men to have been recipients regardless of marital status, but the gender difference was especially striking among the non-married.

Main sources of income

In both surveys, respondents were asked about their most important source of income. Marked and similar gender differences were revealed (Table 7). A far larger share of men than women reported their own work as the main source of income, consistent with the considerably higher male economic activity level. While children were the main source of income for a significant proportion of both older men and women, they were especially important for women. The majority of older Thai women reported children as their income source, but only about two-fifths of older men, and a larger proportion of women than men reported their spouse or

other relatives as their main source of income. Men were somewhat more likely than women to depend for income on their savings, rent, interest, and pension or lump-sum retirement payments.¹⁴

The main source of income was strongly associated with both marital status and age. Although gender differences persisted, they were less pronounced among non-married older people. Non-married older people of both sexes were far more likely than the married to rely on children as their main source of income. In part this compensated for the lack of a spouse to provide income, especially among women, given that married women reported a spouse as their main income source far more than did married men. A substantially higher percentage of non-married than married older people reported other relatives as a main income source, consistent with the findings that the non-married are far more likely to report receiving money from other relatives (see Table 6).

The main source of income tends to shift with age and as older people become economically inactive (results not shown). Both surveys indicated that a substantial majority of men and women aged 80 and more years relied on children as their main source of income, and that few depended on their own work. Gender differences also attenuated with age. Given that the proportion of older people who are non-married increases with age, the patterns of main support associated with marital status and age are inter-related. Nevertheless, logistic regressions of data from both surveys indicate that the likelihood of depending mainly on children was significantly and independently related to *each* of age, gender and marital status (results not shown).

Economic wellbeing

The presented results reveal a complex pattern of association between gender and sources of economic support among Thai older people, as well as interactions with gender and marital status. Do these patterns translate into net differences in economic wellbeing? Both surveys provided information that helps answer this central question. As others have discussed at some length, measuring the economic wellbeing of older people poses difficulties, particularly in societies such as Thailand where older people are typically embedded in inter-generational households (Hermalin, Chang and Roan 2002). Moreover, substantial differences may exist between objective and subjective measures of economic wellbeing (Chan, Ofstedal and Hermalin 2002). Thus, it is important to consider both types of measures and to take their potential strengths and weaknesses into account. Table 8 provides measures of income, financial position, household

TABLE 8. *Income, household wealth, and perceived adequacy of income, by gender and marital status, people aged 60 years and over*

Income measure	Total		Currently married		Non-married	
	Men	Women	Men	Women	Men	Women
<i>Percentages</i>						
Income (thousands of Baht):						
Combined income last year for respondent and spouse if any (SWET):						
Mean	37.3	24.6**	41.0	36.6	18.0	14.1
Median ¹	12.3	6.0	15.0	10.0	5.1	3.4
Income last year (SET):						
Mean	28.3	19.2***	30.6	21.6***	16.0	16.9
Median ¹	12.0	9.6	15.0	10.0	6.0	7.0
Combined income last year for respondent's household (SWET):						
Mean	78.7	67.7	77.5	67.6	84.8	67.8*
Median ¹	35.0	28.0	35.0	27.0	30.0	30.0
Indicators of good financial position:						
Has, or spouse has, a savings account (SWET)	35.2	29.1***	36.5	32.8*	29.0	26.1
Has, or spouse has, no debt (SWET)	69.1	81.3***	65.7	71.2**	85.9	89.5
No financial problem last year (SET)	45.6	51.6***	44.8	48.0*	49.8	55.2*
Household wealth index (means): ²						
Based on SWET	7.1	7.0	7.2	7.1	6.8	7.0
Based on SET	10.1	10.1	10.2	10.1	9.3	10.2***
Perceived economic wellbeing:						
Very satisfied or satisfied with present financial situation ³ (SWET)	67.7	73.5***	66.4	69.2	74.3	77.1
Feel that their income is enough (SET)	63.0	65.9*	62.6	65.1	64.7	66.6

Source: 1995 SWET and 1994 SET, as indicated for specific variable.

Notes: 1. Significance tests not performed. 2. The household wealth index is based on the possession of selected household possessions weighted roughly by cost and the quality of the housing (judged by the interviewer in SWET and based on characteristics of the dwelling in SET). 3. This variable omits respondents who were interviewed by proxy.

Significance levels (male-female differences): * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$.

wealth, and perceived adequacy of and satisfaction with personal finances. We start by considering income, often considered a prime indicator of economic wellbeing for older people in developed countries. In Thailand, however, income is not only difficult to determine accurately because a large proportion of the population is self-employed, particularly in agriculture, but also it is difficult to interpret when older people live in households supported by the incomes of multiple members.

SWET respondents were asked to state both their personal income, including that of their spouse (if married), and the total household income (if others live in the household). SET respondents were asked only about personal income without making explicit if they should include their spouse's income. This difference in survey questions may explain why the

mean for personal income reported in SWET for currently married respondents (and for respondents overall) was substantially higher than that in SET, although the differences in median personal income did not replicate this pattern. In either case, in both surveys men reported substantially higher incomes than women, and married respondents of both sexes reported substantially higher incomes than the non-married. The overall gender difference in mean income was largely attributable to the far higher share of non-married women. When marital status is controlled, the gender differences in mean income were far more modest and remained statistically significant only for SET married respondents. Gender differences in median income, however, remained substantial for married respondents in both surveys, but were in opposite directions for the non-married. SWET indicated that older men tend to live in households with higher average incomes than women, regardless of marital status, although the differences for the total and the married populations were not statistically significant. Non-married men reported a significantly higher mean household income than non-married women, but the two groups' median household incomes were similar.

That the findings on gender differences in income from the two surveys are not entirely consistent might reflect one or more of the difficulties of obtaining accurate income information, or differences in the income questions and in the ways in which the surveys were conducted. We therefore turn to other measures of economic wellbeing that are less problematic. The second panel of Table 8 shows several indicators of financial position. In SWET, respondents were asked whether they or their spouse had a savings account. Around a third of all older people said they did: the married were more likely than the non-married to report an account, and men somewhat more likely than women. The gender differences are fairly modest, particularly among non-married older people, for whom the interpretation is most straightforward. Among married respondents, the question refers to a savings account of either spouse, and the lower prevalence among wives than husbands reflects the age differences between them.¹⁵

SWET respondents were also asked whether they or their spouse had outstanding debts, while SET respondents were asked whether they had had financial problems during the previous year. Overall, women were considerably more likely to report the absence of debt than men, a differential largely attributable to gender differences in marital status. While currently-married women were still more likely than their male counterparts to report being debt-free, the nature of the question (which refers to debt of either spouse) complicates interpretation. Notably, among the non-married, for whom the meaning of the question is unambiguous,

statistically significant differences were not found. Women respondents in SET were considerably more likely than men to indicate they had not had financial problems during the previous year, both overall and in each marital status.

Both surveys collected data on household possessions and the quality of the dwelling unit from which household wealth indices can be constructed. Because the questions on household possessions and housing quality were not identical in the two surveys, the derived household wealth indices are not directly comparable. For both indices, the named household possessions were weighted roughly by their relative cost, and the quality of the dwelling given greater weight than any single possession. This measure of economic wellbeing avoids many of the problems involved in the determination of income, although it does not address the extent to which older household members have access to or benefit from the items reflected in the scale. As Table 8 shows, older men and women in both surveys had very similar mean household wealth. The only statistically significant difference was for non-married older people in SET, among whom women scored slightly higher than men.

Subjective measures of economic wellbeing may be more telling than objective measures because they allow respondents to make a summary evaluation of all components of their economic situation (Chan, Ofstedal and Hermalin 2002). Overall, older women in both surveys were significantly more likely than men to report being satisfied or very satisfied with their financial situation. Although the direction of the gender difference persisted in both marital status groups, for neither was it statistically significant, an interesting finding given the higher average personal and household income reported by men which, as has been shown, is consistent with their higher levels of economic activity and receipt of most types of non-familial support. This income advantage for men, however, does not translate into better perceived economic wellbeing. The other indicators provide evidence of relatively small gender differences, not all of which favour men. Among non-married older persons, women tend to be better off than men in most examined dimensions.

Health and physical wellbeing

In Thailand, as in virtually every other country, mortality is substantially higher for older men than women, *e.g.* the 1995–96 mortality rates indicated that average male life expectancy at 60 years of age was four years longer for women than men (NSO 1997). In many developed and developing countries, however, older women tend to report poorer health

than men (George 1996; Rahman *et al.* 1994; Verbrugge 1985, 1989). As the top panel of Table 9 shows, this is the case in Thailand for several indicators of health and physical functioning. Unlike economic support and wellbeing, health is clearly an individual condition (although with consequences for spouses). Because health in later life tends to be strongly correlated with age, most measures of health and physical functioning are noticeably worse at the oldest ages (Table 9). Regardless of age, however, women tended to have lower scores than men. In particular, they were less likely than men to rate their own health as 'good' or 'very good', less likely to indicate that their health was 'better than their age peers', and more likely to report having been ill during the previous year. The gender differences were much less pronounced in the responses to the SWET question about illnesses that interfered with daily activities than in the responses to the SET question about any illness. Women were also distinctively more likely to report functional impairments and disabilities, especially minor ones (which is consistent with United States evidence: Verbrugge 1985).¹⁶ The gender gap in health did not worsen with age, however, and was similar or less pronounced among those aged in the seventies as compared to those in the sixties.

It is possible that social and psychological differences lead to gender-based perceptions of health, and especially a greater willingness by older women to report illness that contributes to poor health (MacIntyre, Hunt and Sweeting 1996; Verbrugge 1985, 1989). If so, actual gender differences in physical health and functioning may be much less than these results indicate – an issue that cannot be resolved because objective measures of health were not available from the two surveys. Gender differences in health and longevity result from biological and social risk factors (Verbrugge and Wingard 1987). Generally, men are more likely than women to engage in risk behaviours that are harmful to health (World Health Organisation 2001). As the bottom panel of Table 9 makes clear, this difference is pronounced in Thailand with respect to smoking and drinking.¹⁷ In contrast, women are much more likely than men to report chewing (currently or ever) betel nut, a mild narcotic associated with mouth and throat cancer (Reichart 1995). Those aged 70 and more years were far more likely to report current betel use, which reflects a sharp decline in the habit when the respondents were coming of age. In contrast, age differences in ever-smoking or drinking alcohol were minor, although the proportion reporting current smoking or drinking declined with age. This pattern is consistent with relinquishing the habits as one ages. Overall, these survey results make clear that older Thai women report poorer health and physical functioning than men. The differential must be seen in the context of higher levels of health risk behaviour among men

TABLE 9. *Physical wellbeing and health risk behaviours, by gender and marital status, people aged 60 years and over*

	Total		Aged 60–69		Aged 70 and over	
	Men	Women	Men	Women	Men	Women
<i>Percentages</i>						
Measures of health/functioning:						
Rate their health as good or very good:						
Based on SWET ¹	40.6	30.6***	44.1	31.9***	34.2	27.1**
Based on SET	43.3	34.3***	49.0	38.8***	32.3	26.7*
Say that their health is better than others the same age (SWET) ¹	48.2	35.7***	48.2	33.6***	48.2	38.7***
Illness during previous year interfered with activities (SWET)	27.3	30.6*	25.4	29.6*	30.6	32.2
Reported any illness (SET)	50.2	60.6***	44.8	55.3***	60.7	68.0***
Of nine daily living activities, <i>number</i> with which respondent had difficulty (SWET) ²	1.5	2.5***	1.0	1.9***	2.5	3.5***
Disability status (SET) ²						
No disabilities	37.6	25.2***	45.5	31.5***	22.0	14.7***
Only 1 minor disability	27.2	26.9	29.0	31.2	23.8	19.8
Two or more minor disabilities	25.7	36.0	19.8	31.4	37.1	43.7
Severe disability	9.6	11.8	5.7	5.9	17.1	21.9
Health risk behaviours:						
Smoking (SWET)						
Currently	54.7	10.6***	56.5	11.6***	51.5	9.1***
Used to smoke	32.0	9.0	29.8	8.6	36.0	9.4
Never smoked	13.3	80.4	13.7	79.7	12.5	81.5
Alcohol consumption (SWET)						
Drinks alcohol currently	38.5	12.7***	48.1	14.4***	21.4	10.2***
Used to drink alcohol	38.0	13.5	30.4	12.9	51.8	14.4
Never drank alcohol	23.4	73.8	21.5	72.8	26.8	75.4
Betel nut use (SWET)						
Uses betel currently	11.8	56.6***	7.5	48.1***	19.5	69.4***
Used to use betel	6.9	7.6	5.7	6.0	9.2	10.0
Never used betel	81.3	35.8	86.8	45.9	71.4	20.6

Source: 1995 SWET and 1994 SET, as indicated for specific variable.

Notes: 1. This variable omits respondents who were interviewed by proxy. 2. See text and endnotes for definition.

Significance levels (male-female differences): * $p \leq 0.05$, ** $p \leq 0.01$, *** $p \leq 0.001$.

and, more to the point, greater male disadvantage in the ultimate health outcome, namely survival.

Discussion and conclusions

Although international organisations and academic writing on gender and ageing frequently suggest that older women are broadly disadvantaged in comparison with older men, empirical analyses of the issue are rare partly because of the scarcity of appropriate data. Thailand is exceptionally

fortunate in having specialist surveys on the older population that permit detailed investigation of gender differences (and much besides about population ageing). Prevalent preconceptions of the situation of the older population can be misleading, but appropriate data improve the assessments which guide social policy and programmes for the older population. As our analysis based on the census and two national surveys for Thailand has shown, the association between gender and old age is far more complex and nuanced than typically portrayed. On some dimensions, older Thai women do indeed face disadvantages compared to men. They are significantly more likely to be widowed, to be illiterate, to report being in poor health, and to be entitled to a pension or lump sum retirement payment. They are also significantly more likely to live alone, which is largely a function of gender differences in marital status. Older Thai women also differ from men in ways that may but do not necessarily convey disadvantage. For example, they are less likely to be in the labour force and more likely to depend on children or relatives for their main source of income. The latter is because many older women are not married, the group that is most economically dependent on their children.

Notably, however, other gender differences point to disadvantage among men. Older men are less likely than older women to receive money from a child, more likely to experience debt and financial problems, and less likely to feel satisfied with their current financial situation. Older Thai men also have worse health-risk behaviours and higher mortality rates. For other measures, there were no significant associations with gender, as for satisfaction with the living arrangement, related psychological wellbeing, and co-residence with adult children. In terms of economic support, two-thirds of older people reported receiving 1,000 Baht or more from at least one child during the previous year, with no significant gender or marital status differentials.

Our data are inadequate to assess the extent to which the Thai situation conforms to either the 'double jeopardy' or 'age-as-leveller' hypotheses, since the longitudinal or lifecourse dimension is missing. Nevertheless, in a broad sense the findings do not support the 'double jeopardy' hypothesis, which implies not only that female disadvantage exists across all dimensions of wellbeing among older people, but that it increases with age (as being old is the second jeopardy). The results are, however, consistent with the 'age-as-leveller' hypothesis in certain respects, *e.g.* both older men and women in Thailand face greater specific economic difficulties depending on the given indicator. In addition, older men and women both face health problems, as evinced by men's lower survival, and women's poorer self-reported health and functioning. It is not known if these differences were more pronounced earlier in life and have since converged. Future

studies would benefit from a longitudinal design that collects data over the lifecourse.

To understand more fully the influence of gender on economic wellbeing, especially given the validity and interpretation problems of personal or household income, it is important to develop measures that minimise reporting bias and non-response. But even if one sex is disadvantaged on a particular component of income or wealth, of greater relevance is the net outcome on economic wellbeing. It is therefore of considerable interest that comprehensive indices of household wealth indicate that older Thai women are not worse off than men, even among the unmarried, and that older Thai women are more likely to report a satisfactory or adequate financial situation, and less likely to report a financial problem. These findings cast serious doubt on the generalisation that women are disadvantaged on the economic front. Women may indeed suffer more non-life-threatening illness than men in Thailand, but this must be balanced against lower male survival.

Our analysis provides support for the lifecourse perspective that relates the relative disadvantage of older women to their early-life experiences, roles and reward structures, particularly referring to their access to retirement pensions and the type of support older men and women provide to co-resident children. Until recently, Thai women have had less access to educational and government employment opportunities than Thai men, and this is clearly reflected in the lower percentages of women who received their own government pension or lump-sum retirement payment. Older women's more limited access to retirement funds is, however, mitigated among those whose spouses were government workers, because typically they share the benefits. Moreover, the gender gap in schooling has closed, with more Thai women than men currently attending secondary school and in higher education (Knodel 1997; NSO 2001). Government jobs are gradually being opened to women, suggesting that access to government pensions should be more gender-equitable in the future. In addition, the same proportions of men and women are enrolled in the recently initiated private-sector pension fund. Still, because women experience gendered work roles and reward structures, future research should assess not only access to retirement benefits but also the amounts paid.

Lifecourse roles also appear to influence the type of support that older Thai men and women provide to co-resident children. Older men have been more likely than women to give money and housing, while older women are significantly more likely to help with household chores. With the gradual expansion of professional and other economic opportunities for Thai women, including pay equity, the support provided to co-resident

children by the future cohorts of older people may be less gendered. Consistent with previous studies, our analysis reveals that family members, and most often the adult children, have been an important source of support for older Thais, especially the oldest and women. The most common forms of support have been co-residence or functionally equivalent living arrangements and material help. Future research should examine the motivations for this support, whether out of feelings of filial or emotional obligation, perceptions of economic need, desire for domestic services, or a combination. This would shed light on the ways in which the extent and nature of family support are likely to evolve, and on the implications for gender differences.

This analysis has demonstrated that marital status mediates gender differences in wellbeing among older people. In many cases, controlling for marital status reduced or eliminated gender differences; in others, the analysis revealed that certain marital status groups faced a particular disadvantage in old age. For instance, in comparison with their male counterparts, non-married women faced greater loneliness, significantly lower household income, and a greater likelihood of dependence on non-co-resident children for money, food, clothes and personal belongings. Non-married women were significantly less likely than non-married men to have access to pensions or other retirement funds, and were significantly more likely to receive a government welfare allowance. Given the sharp fall in fertility rates in Thailand, future cohorts of older people will have far fewer children or other working-age relatives to provide support. Thus it will be important to monitor the consequences for older Thais, particularly those groups that have depended heavily on children as their main source of support. Some evidence suggests that having smaller families, in and of itself, has less of a deleterious impact on filial support in Thailand than is commonly feared (Knodel, Chayovan and Siriboon 1992*b*; Knodel, Saengtienchai and Obiero 1995). Nevertheless, should circumstances warrant, the government should be prepared to respond with welfare and health care assistance to the older people who are most adversely affected. Because older women, and particularly non-married older women, tend to be more dependent on children, they could constitute a disproportionate share of those most in need.

Our finding that older women tend to report more illness and functional disabilities than men might justify special attention in the provision of health services. The male survivorship disadvantage, however, should also be addressed, perhaps by targeting health-risk behaviours, particularly smoking and alcohol consumption. Similarly, there is a case for targeting welfare services on older women since they currently are less likely to participate in the paid labour force or to receive pensions or retirement

funds. Still, because older men are significantly more likely than older women to report having financial problems, and because most Thais do not yet have access to pensions or retirement funds, a more equitable approach would be to ensure that *all* needy older persons, both men and women, can access old age assistance. Addressing the remaining gender inequities in government, state enterprise and private-sector employment, which have limited older women's access to retirement benefits, will be particularly important if children's support declines (especially for their mothers). More significant than the gender inequity in pensions, however, is the general absence of pension income among Thailand's older population. As the country's population continues to age, the Thai government should work toward extending retirement benefits to a larger share of the population, especially since the poorest in both rural and urban areas largely fall outside the current safety net provided by employment in government, state and private enterprises.

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NOTES

- 1 Population ageing may be occurring faster in Thailand than the UN projections imply. According to the recently released 2000 census results, the percentage aged 60 and more years exceeds the percentage indicated for 2000 by the UN estimates on which the projections are based (9.5% compared to 8.1%).
- 2 On death, the designated heir of a deceased government official who was receiving a pension receives a lump sum of 30 times the last monthly payment.
- 3 For example, based on SET, among persons age 60 and over whose first marriage had ended, 55 per cent of men compared with 20 per cent of women indicated they had married more than once. The equivalent results from SWET are 69 per cent for men and 34 per cent for women. Viewed another way, according to SET, 16 per cent of currently married men age 60 and over compared with 10 per cent of women had remarried. The equivalent results from SWET are 23 per cent for men versus 14 per cent for women.
- 4 In a small proportion of cases, co-residing older people live with a minor child. In SWET, for example, three per cent of the households of respondents aged 60 or over with a co-resident child lived only with children under 18 years of age.
- 5 When the comparison between men and women is limited to those with at least one living child, the overall gender difference shrinks to within one percentage point and is no longer statistically significant. Likewise, differences between non-married men and women largely disappear, although differences between currently-married men and women remain largely unchanged (results not shown).

- 6 This is particularly so in northeast Thailand where 49 per cent live with a married daughter and 15 per cent with a married son. Consistent with the high proportion of ethnic Chinese and Thai-Chinese in Bangkok, more older people in the city live with married sons than married daughters (35 versus 31 per cent).
- 7 Among people aged 60 and above, 21 per cent of the interviews in SET were provided either completely or partially by a proxy respondent, most commonly because the desired respondent was absent (Knodel, Amornsirisomboon and Khiewyoo 1997). Proxy respondents were not used in SWET if the target respondent was absent but were limited to cases in which the target respondent was mentally or physically unable to respond. The proportion of proxy respondents was therefore much lower (4%) for SWET, and varied with the question.
- 8 According to the 2000 census, 54.6 per cent of men and 38.8 per cent of women aged 60 and above had worked in the previous year.
- 9 For example, according to both SWET and SET data, non-married men and women aged 60 and above were, on average, about five years older than their currently married counterparts. Even after controlling for age, married men and women were more likely to work than their non-married counterparts.
- 10 According to SWET, the average age of the wives of men aged 60 years and over was 61.6 years, compared with the average age of 69.4 years for husbands of the women aged 60 and over.
- 11 The respondent's household was considered to receive substantial support from children or relatives if respondents said that one of their children or relatives was either the main provider for the household, or shared that role with the respondent and/or spouse. A similar definition is used to define whether the respondent's household received substantial assistance with household expenses.
- 12 Because only older people who have a child can receive support from one, a condition for the receipt of such support is having at least one child (biological, step or adopted). Results from SWET are further restricted to having at least one *adult* child (defined as any married child or any child age 18 or older). Insufficient information is available from SET to distinguish adult children. Only a small percentage of older Thais have no living child, and virtually all who have children have at least one adult child.
- 13 In some cases, remittances sent from non-coresident children may be intended for the household in general, especially if minor children of the remitters are in the household under the care of the grandparents (*i.e.* the parents of the remitters).
- 14 Although few older people report pensions as their main source of income, they are important for those who receive them. According to SET, 75 per cent of those who reported receiving pension income said it was their main income source.
- 15 When gender and age of spouse are both included as covariates in a logistic regression with having a savings account as the dependent variable, the coefficient for age of spouse is negative and statistically significant, while the coefficient for gender is not statistically significant (results not shown).
- 16 The nine considered activities of daily living were walking around the house, eating, dressing, bathing and toileting, squatting, lifting objects of ten kilograms, walking one kilometre, walking upstairs, and getting into a car. The following conditions were considered to indicate severe disability: severe memory loss; any form of paralysis; inability to walk even with help; being blind; or being deaf. Minor disability conditions included: fainting often; suffering minor memory loss; needing assistance to walk; having poor vision; and having poor hearing.
- 17 The health implications of alcohol are complex because regular low consumption may be protective of heart disease, while excessive drinking has serious adverse effects (WHO 2001). In Thailand, however, excessive rather than moderate alcohol use is typical (Klausner 1993).

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