

**Part One**

**REPORT ON THE TECHNICAL MEETING ON POPULATION AGEING  
AND LIVING ARRANGEMENTS OF OLDER PERSONS:  
CRITICAL ISSUES AND POLICY RESPONSES**

The Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat, with financial support from the United States National Institute on Aging, organized a meeting of experts from 8 to 10 February 2000, to discuss the most pressing issues related to population ageing, living arrangements of older persons and possible government responses. Population ageing is expected to have a major impact on life in the twenty-first century. Concerned by the looming pension crisis, many Governments are promoting more self-reliance in income security for older persons and greater family responsibility for providing care. Consequently, patterns of caregiving and co-residence are emerging as pre-eminent issues related to the well-being of older persons.

The Meeting was opened by Joseph Chamie, Director of the Population Division. He emphasized that the two most important objectives of the Meeting were, namely, to address key issues related to the ageing process and how Governments were responding to them, and to improve our knowledge of patterns, determinants and consequences of living arrangements among older persons. Mr. Chamie observed that persons aged 60 years or older comprised 10 per cent of the world's 6 billion inhabitants. These older persons will increase to about 2 billion or 22 per cent of the population by 2050, a percentage already attained in the five "oldest" countries: Germany, Greece, Italy, Japan and Sweden.

The present report includes brief summaries of the papers presented in each of the meeting's sessions, along with comments by the discussant, a consolidated summary of the main points arising in the general discussions, and conclusions. The agenda, list of participants and list of documents are included in the annexes.

## I. FORUM SESSION

For the opening session, members of United Nations missions, representatives of non-governmental organizations and members of the press were invited to attend. The forum was designed to create a background against which to cast the main theme of the meeting, namely, the living arrangements of older persons. Each of four experts was asked to consider what were the critical issues and policy responses to population ageing.

Barbara Crossette, moderator of the forum, acknowledged the important function played by the Population Division of the United Nations as a channel to disseminate information and as a useful source of interpretation

Peter Peterson began by stating that ageing is not far away into the future, but is occurring now. It is also

attention to ageing. Finally, there should be national research agencies focusing on ageing, such as those in the United States of America and Japan.

In preparing for an ageing society, he said that perhaps the most important need was for ideological change, in order to curb excessive individualism. There is a need for providing effective support to families, and this must include attention to the needs of the younger as well as of the oldest age groups. Secondly, more research is needed on morbidity, such as dementia and arthritis, to improve the quality of life of those surviving to older ages. Improvements such as these translate into actual slowdowns of the ageing process, and could conceivably reduce the burden on family budgets as well as on other persons. But ageing also creates problems for the young-adult generation, and attention should be directed to them as well. As social relations become more vertical than horizontal (most young adults will have fewer siblings than grandparents), there will be an increased family burden. Finally, as ageing occurs at different times in different places, it will create unique imbalances between countries. For example, as European countries move through a phase of high dependency ratios and labour shortages, developing countries will move through a phase of low dependency ratios and a surplus of young workers. How can these tensions be reduced? Increasing migration from labour surplus to labour deficient countries may be accompanied by political and ethnic tensions.

The fourth panellist, Elizabeth Mullen, reminded the audience that the image of ageing as a “problem” is misleading since it is usually based on a number of myths and stereotypes, rather than on empirical knowledge. The first myth is that older persons are homogeneous, which they are not. A second myth is that older persons are uniformly frail, dependent and vulnerable. As recent evidence in the United States indicates, older persons are less likely to be disabled or infirm than in the pastper( t)dbse pi ehai thoh 6Hhl(u)-2.5(.5(.5(.5 6Hh. H)-6uy4.2(4Tc0p)-2ste

Ms. Crossette began the discussion by asking Ms. Apt whether we in the West have excessively romanticized our view of extended families in Africa by attributing to the extended family a large and central



taking place within social and political contexts that are fragile and precarious. Some of the institutions providing social transfers to older persons either do not exist, are incipient or are being dismantled. Some examples are pension reforms in Latin America and the virtual absence of pension schemes in Asia. He argued that, contrary to many projections, the health status of older persons in Latin America, and possibly Asia as well, is likely to be worse than in developed countries. This implies higher levels of demands and needs, and heightens the importance of understanding living arrangements as it is through them that some of these demands are met.

The trend among older persons in Northern America and Europe has been towards increasing levels of living alone. Countries in Latin America and Asia continue to maintain very high levels of co-residence of older parents with children and, with the exception of Japan and the Republic of Korea, most societies have not yet shown clear indications of drastic changes in traditional patterns of co-residence. It is unclear when changes will occur, but there is a widespread belief that it will not take long before patterns found in the United States and Europe are adopted elsewhere as well.

A review of the literature revealed that remarkably little is known about the relationship between living arrangements and older persons' well-being. Most studies focus on the effects of poverty, income or wealth levels on the probabilities of older persons and children or other kin co-residing, while providing no information about other complementary, but perhaps more important, issues, namely, the degree to which co-residence with children or other kin enhances or depresses the well-being of older persons. In fact, the limited evidence available suggests that older persons living alone, particularly older widows, experience higher levels of poverty than those who co-reside. However, this finding is not universal and does not enable us to draw clear inferences about the direction of causality.

Despite new data, models and methods of inference, the determinants of living arrangements of older persons and the forces precipitating the sweeping changes in traditional co-residential arrangements in developed countries—and potentially in developing countries in the near future—are not well understood. It is believed that changes in income of both parents and children are very influential. It is also possible that some changes are due to changes in the prevailing characteristics of children available to co-reside (life cycle stages and income) and also to changes in preferences, which, in an era dominated by individualism, have turned

*Comments by the discussant.* Nikolai Botev noted that ageing is associated with distortions in the relative



multiple generations, since early death, late marriage and high fertility meant that few multigenerational households were possible. The prevailing household arrangement for older persons was of the extended type. This was the outcome of a stem-family system, whereby older children left the parental household upon marrying, while the youngest child remained at home with the parents. This pattern began to decline early in

more likely to have higher fertility—and that women who live alone are more likely to have higher socioeconomic status, while the reverse is true for men. He also agreed that it was important to determine whether declining co-residence was due to rising parental income or the rising income of the younger generation and to compare actual to potential numbers of two- and three-generation households in order to show that co-residence was almost universal early on. He further concurred with the idea that the widening disparity in education between parents and children contributed to the erosion of co-residence, but questioned whether co-residence would increase once the education gap began to narrow. He suggested that more attention be paid to urban-rural differentials and gender issues.

Mr. Ruggles agreed that the paper gave little attention to gender; the topic was important and perhaps



addition, some of the differences in older persons' living arrangements are associated with differentials in mortality at older ages. In general, living together as a couple is the most common living arrangement of older married persons in each of the four countries studied. While most older men live with a spouse, a large proportion of older women are widows, who have a higher propensity to live alone. There are marked contrasts among countries, with Finland and the United Kingdom of Great Britain and Northern Ireland exhibiting the highest proportions living alone and Italy and Hungary the lowest. Older divorced women show a marked tendency to live alone in all countries, although in Finland, at least, they do so to a lesser extent than widows. However, older divorced women experience higher rates of living in unmarried cohabitation or with lifelong acquaintances than do widows.

The second demographic transition is already leaving its mark and this is evident in the data, which clearly demonstrate the preferences of older people and young alike for living alone, though perhaps near to kin and with possibilities for other kinds of social and material support. However, there are—and always will be—situations that trigger co-residence. One of these is the health status of the older population. Identifying the transition to different living arrangements is important but requires longitudinal data.

An important finding in all countries, but particularly in Eastern Europe, is that co-residence is a social arrangement that favours both older persons and the young-adult generation. This is especially true in situations of severe housing shortages and poor housing quality. To the extent that the quantity and quality of housing improves, social security benefits increase and coverage expands to cover a larger portion of the older population, continued increases in the proportions living alone can be expected. It was noted, however, that there is clear evidence that some older persons, particularly widows and divorced older persons, are opting for flexible living arrangements, such as unmarried cohabitation and living “apart but together”, that guarantee company and support without the need for remarriage. These types of arrangements provide important social and emotional benefits. Once again this points to the importance of studying social support networks rather than co-residence alone.

*Comments by the discussant.* Mohammed O. Rahman noted the possibility of an imminent second demographic transition in Hungary and Italy, which would imply an increase in the prevalence of living alone. He questioned whether this should be a matter of concern. Although the spread of such changes throughout Southern Europe is likely, it is also possible that this would not occur. The relationship between ageing of the population and decline in co-residence with children is not clear-cut: for instance, in Italy, the country with the highest proportion of older persons in the world, co-residence is much more common than in countries where the ageing process is not as advanced.

Mr. Rahman highlighted the phenomenon of living “apart but together” among widows and widowers. This type of arrangement merits attention, for it implies the emergence of household-based relationships that might escape notice if only conventional co-residential patterns are examined. This calls for new methods of data collection on emerging trends in living arrangements in Western Europe that are replacing co-residence with children or kin or living alone.

Mr. Rahman noted that the Sokolovsky paper raised an interesting issue regarding the validity of narratives of neglect, when co-residence and respect for older persons prevail. What do these narratives reflect? Anticipatory behaviour? Do they announce the demise of the traditional system? The evidence presented by the author suggests relative stability of co-residence arrangements in a highly changed community. This should alert us to the need for caution in using terms such as “ageing crisis”, as there may not be a crisis, particularly when communities are able to adjust without dismantling traditional living arrangements.

V. A

the Chilean reform is that a private system tends to work well for high-income workers, but poorly for low-

they are economically more dependent than men yet are also much more likely to be widowed and thus to live alone. Considerable differences exist between rural and urban areas. The pattern of living arrangements of older persons changed little, if at all, between 1982 and 1990. Drawing upon empirical findings discussed in the paper, the authors review selected policy recommendations for strengthening the family support system, establishing an old-age insurance programme in rural areas, and designing programmes to increase the level of benefits for disadvantaged older persons (particularly widows), and to smooth the transition to a “two-child plus spacing” policy to replace the current one-child policy.

The paper presented by Nana Araba Apt focused on rapid urbanization and living arrangements of older persons in Africa. A number of drastic changes have occurred in the recent past, some of which would have been unthinkable until recently. First, systems of authority and dominance favouring elders have weakened as they play less important roles within the extended family. This is mainly the result of the erosion of rural production and of the household as the unit of production. Massive migration flows towards urban areas undermine the traditional system in which older persons commanded respect and authority. As older persons become more dependent within an altered social and economic context, and widespread poverty persists, families find it more difficult to support their older members. Thus, care of older and dependent parents, a task that in Africa only children can perform, will burden young adults well into the twenty-first century.

The troublesome fact is that, in Africa, ageing and the situation of older persons is not really felt or acknowledged as a problem by political leaders or other interested parties. Africa is still demographically very young, and issues related to the care of older persons have less priority amid a number of more urgent problems. African countries not only lack resources that can be diverted to increase older persons’ well-being but national Governments themselves are unlikely to act efficiently either to generate new resources or to allocate efficiently those that exist. Thus, at least in the near future, the well-being of older persons will be entirely dependent on the ability of children to provide for parents. A key issue is how to mobilize support in an environment where co-residence is threatened by large migration flows, where diseases and epidemics (including HIV/AIDS) are eroding the demography of households and families, and where there is massive unemployment of the young. Older people may have to continue working well past what in the West are considered ages of retirement. Given that, in the foreseeable future, Africa is unlikely to be able to build a comprehensive welfare system, limited measures are worth considering, such as tax breaks for those taking care of older relatives, and construction of community centres that can be used as meeting places or clubs for older people. The paper concludes with a number of policy recommendations for Ghana, including promotion of rural development, strengthening older persons’ income-earning opportunities, promoting village-based

small industry and business development, encouraging and facilitating older persons' participation in the labour force and securing additional education and vocational training.

*Comments by the discussant.* John E. Dowd, the discussant for the session, noted that all four papers made clear the need to utilize all the demographic information available, including information on health and disability, on risk factors and on chronic illnesses, before one could make an assessment of the situation of older persons according to co-residence status. Although in most cases those data do not exist, sometimes minimal data sets are available for making appropriate inferences. In the absence of well-integrated and coherent data sets, we need to work on a piecemeal basis, trying to assemble various segments of information from different sources.

Mr. Dowd found commonalities in the policy recommendations proposed by the authors of all four papers, but also questioned whether some of the measures were feasible. For example, all four authors agreed on the need to ensure better pensions for workers in all sectors of the economy as a way to ensure less dependency on children or relatives. He questioned whether this was realistic for many poor countries, where social security systems either do not exist or have very limited coverage. A second common thread in the papers was the recommendation that older persons be given a chance to participate more fully in the labour market under a variety of schemes to secure economic support as well as social integration.

## VI. POVERTY, HEALTH AND LIVING ARRANGEMENTS OF OLDER PERSONS

Jenny de Jong Gierveld opened the session by noting that the papers to be discussed focused on the relation between well-being and residential arrangements but from a somewhat different perspective. The question now was whether there is any evidence that different co-residential arrangements lead to different health or poverty status among older persons.

Emily Grundy described evidence of the relations between living arrangements and characteristics of older persons, focusing on studies in the United Kingdom. Although there are theoretical reasons to suggest that living alone might have adverse effects on the health of at least some older people, the empirical evidence shows that those living alone are generally in the best health. However, in interpreting this fact it is essential to take into account the importance of selective moves to institutions and to relatives' households. In particular, among the very old, living alone may only be an attractive or possible option for those in reasonably good health or with good support systems. Given that surviving spouses, attentive daughters and personality cannot be randomly allocated, it is unlikely that the "true" effects of living arrangements on the health of older



adults can ever be quantified. Moreover, these are certain to vary between populations and individuals. The

relatives living outside the home was more important than support from inside. Many older people are homeowners. This often represented a significant contribution to family welfare, but was rarely recognized by those concerned. The results of the microstudies are highly context-specific and may not apply to poor older people living in other urban communities. However, they draw attention to the complexity of older people's living arrangements and to the dangers of making assumptions about socio-economic relations from raw demographic data.

Finally, Mapule F. Ramashala described conditions of older persons in South Africa, using the 1996 South African population census. The projected growth in the number of persons aged 75 and over is of particular concern, because this group has the greatest number of needs that must be met: economic security; access to essential health and human services; adequate housing and personal safety. Of particular importance in South Africa is the problem of housing, which, combined with large rural to urban migration outflows of the young, leads to drastic alterations in patterns of living arrangements of older people. We know little about the existence and feasibility of alternative living arrangements, especially for older persons who are frail, the slightly impaired, and those who need sheltered housing but not nursing care.

Inadequate housing conditions are particularly problematic for older people who are disabled. In South Africa, one policy response to the severe reduction in public expenditures supporting nursing homes has been the concept of "ageing in place", whereby older people remain in their homes, with their kin or children. Providing support services to permit people to remain in their homes is considered the best option by many in the field of gerontology and appears to be a feasible solution for South Africa. To the extent that such policy is complemented by public assistance to meet the basic needs of older persons and the members of their households, programmes for "ageing in place" may take advantage of kin and young adults who can remain with older people, thus providing an array of services while in turn receiving shelter and sharing household goods in compensation for their services. These mixed strategies that combine familial support and state-based support to sustain familial care are likely to be, on the whole, less costly and probably more effective than strategies exclusively based on one or the other.

*Comments by the discussant.* The discussant, Martha Pelaez, noted that the four papers were tied together by a common attempt to understand either the extent to which certain characteristics of older persons (health, disability and poverty) affect co-residence or the degree to which living arrangements and marital status influenced older persons' characteristics such as health status and disability. Furthermore, the existence of two-way relations—for example, health affecting living arrangements and vice versa—has been repeatedly mentioned, warning us to be cautious in making causal inferences. With the exception of the paper by Ms.

Ramashala, which is based on census data, all the papers highlight the importance of social networks beyond those created through co-residence. The papers also stress the influence of housing availability and housing characteristics. Throughout the meeting participants emphasized the need to examine the complete set—or as complete a set as possible—of older persons’ social relations rather than confining attention to those in the household. Less attention was paid to issues of housing location and housing quality. Location and quality of housing may directly affect the health and well-being of older persons, and it might also determine the locus of control and therefore the likelihood that older persons can live with the younger generations. Clearly, special communities developed to house older persons by definition exclude multigenerational living arrangements.

An important issue highlighted by the papers is the need to study the dynamics of living arrangements.

transfers; and (c) older people's preferences in terms of living arrangements and care. First, research on changing family structure should take into account alternative and changing family forms—including “blended families” that result from divorce and remarriage—and their possible consequences for living arrangements later in life. Changes in kin availability also needed attention. Grandparent-and-child families are increasingly common in some countries, particularly where HIV/AIDS has orphaned many children. With regard to the

as a forum for launching the research agenda on ageing for the twenty-first century. He also spoke of the European regional conference on ageing, which is also expected to be convened in 2002.

Nikolai Botev described the work programme of the Population Activities Unit of the Economic Commission for Europe (ECE). There were four areas of work: (a) international migration and migrants; (b) population ageing and older persons; (c) fertility, family and reproductive health and (d) follow-up to



Data on living arrangements need to be supplemented by other information in order to understand the implications of changing residential patterns for older (and younger) persons' welfare. First, we need to know about preferences of older persons and of their kin. Secondly, for a comprehensive picture of support provided within the family, it is important to investigate the role of kin living elsewhere, since relatives, and even non-relatives, living nearby may be an important source of emotional support and assistance, and even distant kin may provide significant financial assistance. Thirdly, for sound policy decisions, we need a better

and disability. Similarly, the ability of older persons to be satisfied and live without stress is likely to be a function of characteristics such as gender and education.

Because of their low rates of participation in the formal labour market, women are most vulnerable economically and their well-being may be more dependent on co-residence than is that of men. Also, since roles within families differ according to characteristics such as gender, age and marital status, co-residence will have different effects according to the status of the older persons regarding those characteristics.

The characteristics of the adult children are also important in determining living arrangements. It was reported that, in Brazil, older persons' own expectations are that their daughters, not sons, will take care of them in old age. A similar division of labour between sons and daughters has been observed in some countries of Asia, although in others a daughter-in-law traditionally provides most day-to-day assistance. Trends affecting the younger generation, such as increases in divorce, cohabitation and women's labour force participation, could limit the willingness or the capacity of children to provide support to parents through co-residence. The strength of bonds established earlier in life may also have an important effect. For example, the prevalence of living alone among divorced men in several European countries was higher than among divorced women. This could be due to the stronger childhood bonds formed between mothers and children than between divorced fathers and children.

Several participants remarked that the option of institutionalization is often ignored in discussions of living arrangements of older persons and seemed not to be regarded as a realistic or satisfactory option. Is this because there is a stigma attached to it? Or is it really a matter of lack of demand? Is it possible that the supply of acceptable institutional options is limited and insufficient but that the latent demand is substantial? Meeting participants confirmed that institutionalization was indeed stigmatized in many developing countries, including China. Yet, the issue is of relevance to older persons everywhere, not just in developed countries. It was noted that, especially for the younger old, institutionalization was often linked to health problems, while



In some areas of the world, there are creative alternatives to both home-based care and institutionalization. Thus, for example, in a few countries older persons are beginning to reside in communities specially designed for them. Older persons should have a say in determining the location and functioning of these communities; for instance, a location near downtown areas may be preferred because it provides easier access to cultural activities and a range of shops and services. These communities help resolve some of the social integration problems referred to earlier. However, whether they become widespread or not will depend on social, economic and, ultimately, cultural conditions.

This also raises the question of costs: Governments will become interested in the issue only to the extent we are able to show the costs associated with each set of options. In many settings families are currently providing care that would be costly to replace. For instance, a study in Ukraine made approximate estimates of the cost of providing paid caregivers for older persons to meet all the needs of the elderly for outside care, which is currently partly covered by family members and the formal sector. In this case, to care for the needs of older persons, using only outside providers, it was estimated that the Government would need an amount close to the total health budget of Ukraine.

Whereas in developed countries, pensions and social security expenditures are an important source of income for the older population, in most developing countries, the majority of older persons do not have coverage of any type, as their labour experience revolves around the informal economy. In these cases, providing broad coverage would require the establishment of social security systems that cover the informal economy. Another approach is South Africa's programme of assistance that subsidizes the family or close kin for care provided to older persons.

At present, living with children and other kin may be the only option available to the majority of older persons in developing countries, and those who lack this option may face destitution. Even in those countries, though, co-residence is not a panacea. To the extent that older persons contribute to the household, joint living arrangements may be tolerated and considered advantageous to all members of the household. But as older persons' contribution begins to decrease and as they become more a source of demand for services, there is reason for concern that co-residence arrangements may begin to weaken. When co-residence becomes increasingly difficult or is simply not an option, some older people will necessarily have to enter institutions.

#### *Data and research needs*

Meeting participants also discussed data needs and methodological approaches for answering many of the unresolved questions noted above. Assessment of data needs and design of data-collection instruments must take into account policy concerns and should be informed by theories of social functioning and social and economic change. In this regard, some participants regretted that the meeting had devoted relatively little time to theoretical issues.

In many developing countries, even basic descriptive information from a cross-sectional survey or case study is difficult to come by, especially given the inevitable competition for scarce research funds. One way to deal with this is demonstrated by John E. Dowd and colleagues at the World Health Organization, who are







non-existent systems of social transfers continue to place older persons at a disadvantage, even in cases where they may prefer to live independently, rather than with their children or other kin. Thirdly, apart from areas where migratory outflows are massive, conditions for the younger generations are not always conducive to situations where the pooling of resources and the economies of scale reaped from joint living arrangements can easily be foregone. Finally, only in a few of these societies have demographic and economic transformation led to rigidities in the life cycle of younger individuals—owing to career demands, dual-earning couples and marital disruption—to constrain the field of choice for living arrangements of older persons.

At the same time, if the above explanation of trends in the more developed countries is correct, this has major implications for developing countries as well. Their economies will, necessarily, in the course of development, undergo similar structural changes away from family farms and family enterprise. Nana Araba Apt reported that such changes were already tending to undermine the traditional authority of older persons in Africa. These changes are occurring more rapidly in developing countries than they have in the West, and the generational gap in education and earnings—two other factors thought to be important—is even wider in many developing countries than it has ever been in the West.

#### *Co-residence and well-being*

There are a number of reasons to be concerned about patterns of older persons' living arrangements. First, older persons' living arrangements have spillover effects. That is, individual decisions about joint or separate living affect social and contextual characteristics. Thus, they have an impact on aggregate demand for housing and housing services as well as on the size and type of demand for social services and caregiving for older persons. Secondly, it is widely believed that living arrangements are one factor, among many others, that influence older persons' well-being.

In the meeting a number of interventions identified the first reason as one of some importance but also made it clear that it was a neglected area of research. The second reason for examining older persons' living arrangements attracted much more attention. Yet, even though more research has focused on it, the kinds of inferences we can normally make are remarkably weak and tentative. The simple question "Are older persons who live alone better or worse off than those who live with children or relatives?" cannot be answered in a straightforward way. First, there are issues pertaining to identification of causal relations that are simply insurmountable with the data normally available. Thus, unless one has longitudinal observations, it is difficult, if not impossible, to decide whether conditions defining older persons' well-being lead to a particular type of

residential arrangement or vice versa. Some may go so far as to say that without the ability to perform a randomized experiment, we will never be able to make unequivocal statements about this question.

Secondly, if living arrangements influence older persons' health conditions, socio-economic standing,





## ANNEX I

### Agenda

#### 1. Opening of the Meeting

Forum on Critical Issues and Policy Responses to Population Ageing.

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## ANNEX II

### List of participants

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Jenny de Jong Gierveld, Netherlands Interdisciplinary Demographic Institute, The Hague, Netherlands

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John E. Dowd, Ageing and Health Programme, World Health Organization, Geneva, Switzerland

Antonio Golini, Dipartimento de Scienze Demografice, University of Rome, Rome, Italy

Emily Grundy, Centre for Population Studies, London School of Hygiene and Tropical Medicine, London, United Kingdom of Great Britain and Northern Ireland

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\*Participated in the Forum only.

*United Nations Population Division*

## ANNEX III

| <i>Symbol</i>      | <i>Agenda item</i> | <i>Title/author</i>   |
|--------------------|--------------------|---|
| UN/POP/AGE/2000/11 | 6                  | Living arrangements and the health of older persons in less developed countries: evidence from rural Bangladesh<br>Mohammed O. Rahman |
| UN/POP/AGE/2000/12 | 6                  | Living arrangements of older persons and poverty<br>Peter Lloyd-Sherlock  |
| UN/POP/AGE/2000/13 | 6                  | Living arrangements, poverty and the health of older persons in Africa<br>Mapule F. Ramashala   |
| UN/POP/AGE/2000/14 | 7                  | Future research directions<br>Victoria Velkoff  |
| UN/POP/AGE/2000/15 | -                  | Note on statistical analysis and microsimulation for studying living arrangements and intergenerational transfers<br>Douglas A. Wolf  |

***Information papers***

|                       |                                  |
|-----------------------|----------------------------------|
| UN/POP/AGE/2000/INF.1 | Provisional organization of work |
| UN/POP/AGE/2000/INF.2 | Provisional list of participants |
| UN/POP/AGE/2000/INF.3 | Provisional list of documents    |

**Part Two**

**BACKGROUND PAPERS**