

# AGING TRENDS

## THAILAND

Currently, population is aged 55

Like most other Asian countries, the elderly population of Thailand is growing much faster than the population as a whole. Between 1989 and 2020, Thailand's total population will increase about 30% and over is projected to triple, adding 55 million older men and women, almost half of whom will be 65 and older.

divides a population into numerically is Singapore in its rapid "maturing." Between 1989 and 2020, Thailand's median age is projected to rise from 23 to more than 36. In other words, the number of persons under the age of 23 now equals the number over

age will be 13 years higher.

By way of comparison, Singapore's median age will rise only modestly—from 24—in 30 years. Thailand's median age will jump from 28 to 43 in the same period of time.

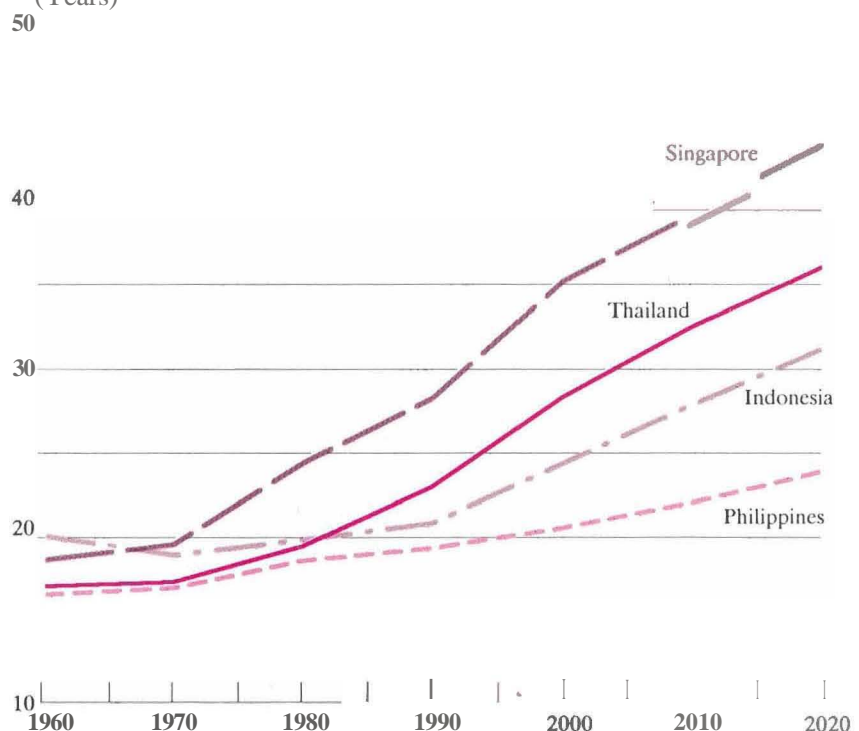
The rapid increase in median age in Thailand and Singapore is due, in large part,

Table 1.  
Percentage of Population in Older Age Groups: 1989 to 2020

Region or country	Year	55 and over	65 and over	75 and over
Eastern South Asia	1989	8.3	3.3	0.9
	2005	10.2	4.8	1.4
	2020	15.0	6.5	2.1
Thailand	1989	9.4	4.1	1.3
	2005	13.0	6.3	2.1
	2020	21.1	9.5	3.2
Philippines	1989	7.6	3.3	1.0
	2005	9.0	4.1	1.2
	2020	11.6	5.2	1.6
Singapore	1989	12.1	5.6	1.9
	2005	19.3	8.9	3.0
	2020	33.5	16.5	5.0

Thailand now has higher proportions of people in the older age ranges relative to other countries in the region; with the exception of Singapore (where more than 12 percent of the population is aged 55 and over), Thailand is the "oldest" country in Eastern South Asia. Projections to the year 2020 imply that 21 percent of the population will be aged 55 and over, making the Thai elderly one of the fastest growing older populations in Asia.

Figure 1.  
Median Age: 1960 to 2020  
(Years)



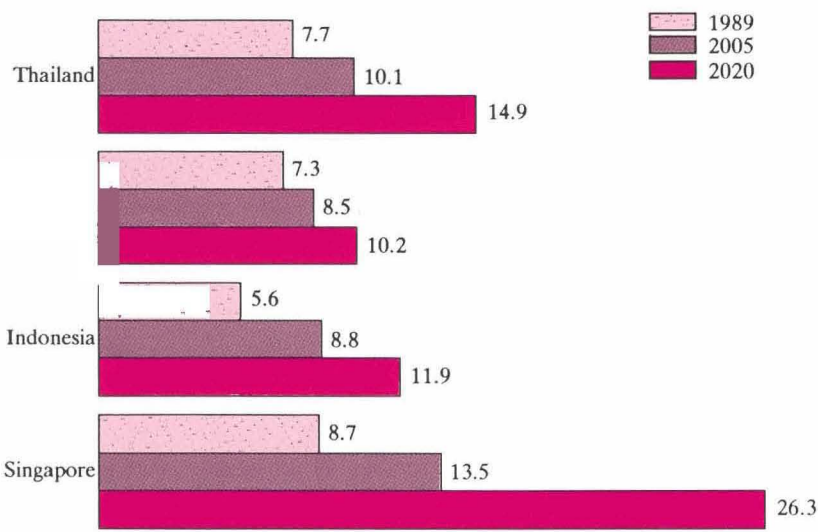
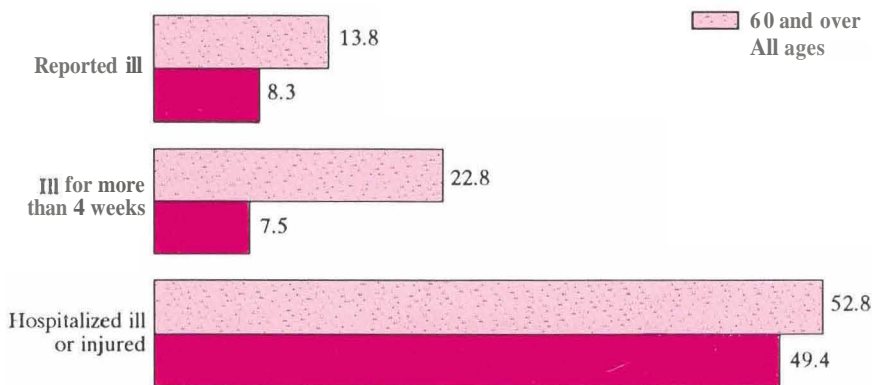


Figure 3.  
**Health Indicators for the Elderly and Total Population: 1981**  
 (Percent)



to a marked decline in fertility since 1965. The total fertility rate for Thailand dropped significantly from 6.1 in 1970 to 3.7 in 1980. Currently, each Thai woman has, on average, just over two children (2.2); this is projected to decline to 1.9 by the year 2000.

Another indicator of population aging is the change in support ratios—the number of "dependent" persons (children under age 20 and/or adults 65 years and over) per 100 persons in the "productive" ages (20 to 64 years). In 1989, the total support ratio for Thailand is 88.7. This means that for every 100 persons in the

productive age range there are 89 persons in the dependent age ranges.

Although the total support ratio in Thailand will decrease over the next three decades (to 56 in 2020), the elderly support ratio will rise from just over 7.5 in 1989 to nearly 15 in 2020 (figure 2). Increasing elderly support ratios imply increasing economic dependency of and financial responsibility for the elderly population.

### LIFE EXPECTANCY

Life expectancy at birth in Thailand is not unlike that in other Eastern South Asian countries. The average Thai born today

can expect to live about 65 years, similar to levels in the Philippines, Vietnam, and Malaysia (66, 64, and 67 years, respectively). The average for both sexes in Thailand is projected to reach 68.4 years in 2000.

Life expectancy for older persons also is increasing. In 1980, Thai women 55 years of age could expect to live another 22.8 years. By 2000, women who reach their 55th birthday will be likely to see another 24.2 years.

### AGING AND DEVELOPMENT

An aging society shares certain characteristics with a developing economy. Both show improved life expectancy and reduced fertility, which are related to effective family planning policies, improvements in public health, urbanization, and a higher standard of living.

On the other hand, a shift in age structure from younger to older can place stress on those same indicators of development. For example, as life expectancy rises and as health care systems improve, Thailand will have increasing numbers of people in the "oldest old" age range (75 years and over). By 2020, nearly 2.3 million people in Thailand will have celebrated their 75th birthday, triple the present number.

Many of these people may be living with disabilities and illnesses from which they might have died a generation earlier. This can be taxing on society, as increased hospitalization and public health expenditures are needed, as well as on individual families, as more full-time care is needed from children and grandchildren who might otherwise be in the work force.

### HEALTH AND MORBIDITY

Thailand's Health and Welfare Survey of 1981 found that the morbidity level for the elderly (age 60 and older) was substantially higher than for the nation as a whole. The proportion of older persons reported ill for more than 4 weeks was 23 percent, versus 8 percent of the entire population (Chayovan, in CUIPS, 1985). Nevertheless, the level of hospitalization for those ill and injured was similar (around 50 percent) among the two age groups (figure 3).

numbers of elderly, but also a change in the types of predominant illnesses. Aging populations increasingly experience chronic and noncommunicable conditions such as cardiovascular disease, chronic rheumatism, and cognitive function. Thailand's Ministry of Public Health statistics for 1980 show that cardiovascular diseases are the leading cause of death for those aged 60 and over. This has increased the need for long-term, full-time care which may necessitate a change in focus for the health care industry in Thailand.

**highlights**

The 1981 survey also shows a rapid increase in the prevalence of disabilities for both men and women after age 49, with the rate for men being consistently higher than that for women (figure 4).

Another study done in 1982 (Siriphanich et al., in 1985) shows that about 7 percent of the elderly were disabled, compared to only 1 percent of the total population. Put another way, more than one-quarter of disabled persons in Thailand were elderly (60 and older). Nearly one-third of the reported disabilities among the elderly in 1982 involved loss of hearing (figure 5).

**DIMENSIONS**

Between 1970 and 1980, the proportion of elderly living in urban areas remained essentially the same (5.2 percent), while the elderly share of the rural population increased slightly from 4.8 to 5.5 percent (1985).

**URBAN/RURAL**

This trend is beginning to reverse itself. Over the next three decades, the elderly population in Bangkok will most likely grow more rapidly than the elderly population as a whole, in part because of Bangkok's lower mortality rates as well as the aging of its sizable young adult population. The portion of the metropolitan area's residents aged 60 and older is projected to increase from 5 percent in 1980 to 8 percent in 2000, and 14 to 18 percent (depending on demographic assumptions) in 2020 (Warnes and Horsey, 1988).

**Prevalence of Disability by Age Group: 1981**

(Disabled persons per 100,000 population)

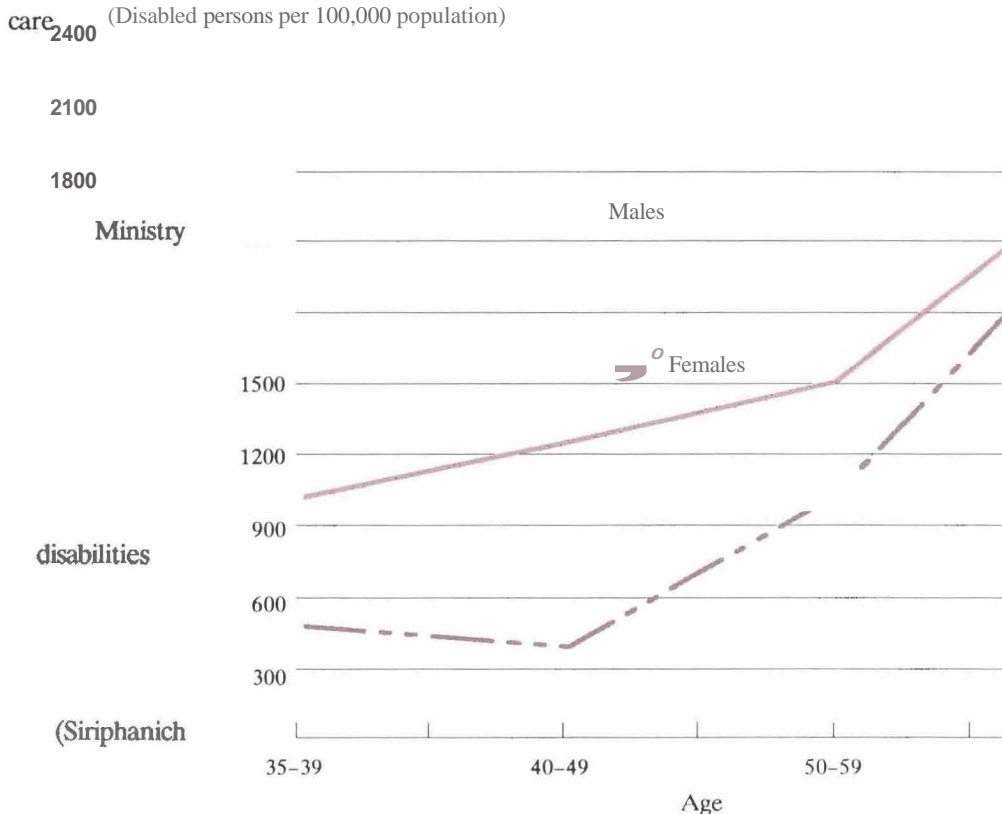


Figure 5. Disabled Elderly (60+) by Type of Disability: 1982

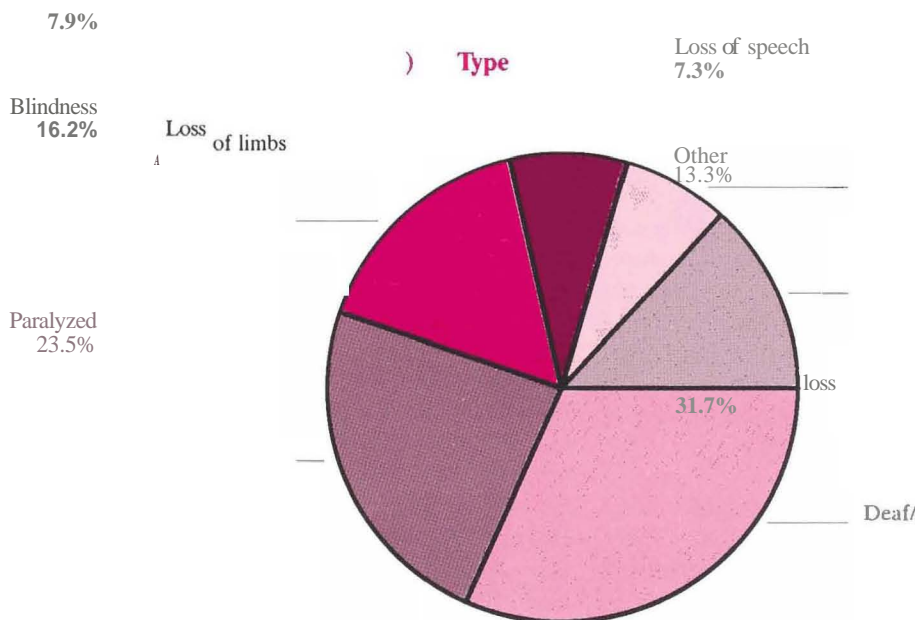


Table 2.  
**Primary Source of Economic Support for Persons  
 Aged 60 and Over: 1985**  
 (In percent)

Country	Pension		Children or grandchildren		Own business or salary		Other	
	Male	Female	Male	Female	Male	Female	Male	Female
<b>Thailand</b>	<b>5</b>	<b>1</b>	<b>38</b>	<b>54</b>	<b>40</b>	<b>21</b>	<b>17</b>	<b>24</b>
Indonesia	13	4	22	47	56	30	9	19
Malaysia	16	6	38	67	36	12	10	15
Singapore	9	1	53	80	25	7	13	12

Source: Hugo, 1988, tables 4, 5, and 11.

nonfamily forms of support such as the government or community. In 1985, only 54 percent of elderly women and 38 percent of elderly men in Thailand said that their main source of support was their children or grandchildren (Hugo, 1988).

In addition, many elderly are not eligible for government pensions. Thailand's pension system currently covers only civil servants and some private sector employees, about 3 percent of the working population in 1985. In that same year, 5 percent of males and 1 percent of females said that their main source of support was some form of pension (table 2).

Several studies have suggested that a majority of the elderly in Thailand have some economic difficulties, regardless of where they live. Data from various sample populations in the early 1980's reveal large proportions of elderly with incomes below the poverty level (less than 1,000 baht per month), reaching as high as 77 percent in one study (Kumnuansilpa et al., in CUIPS, 1985).

Reported work participation rates among the urban elderly are consistently lower than in rural areas. In 1986, 39 percent of rural Thai aged 60 and over were in the

labor force versus 23 percent of older persons in municipal areas. Some of this differential is related to the varying demands of agrarian work, which may require one to work later in life. In addition, older people living in cities may have more difficulty supporting themselves due to the standards and regulations of the formal sector such as prescribed retirement ages and required levels of education.

Of those men 60 and older living in cities who were in the labor force in 1981, 30 percent were reported as being "inadequately utilized". This means that they were unemployed, wanted to work more hours than they did, or said that their education and training did not match their present occupation. For urban women aged 60 and over in the labor force, 43 percent were reported as inadequately utilized.

## REFERENCES

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