



THE DYNAMICS AND CONSEQUENCES OF POPULATION AGEING IN TRINIDAD AND TOBAGO: A CALL FOR RESPONSIBLE PLANNING FOR SUSTAINABLE DEVELOPMENT

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Abstract: Of the competing forces threatening to destabilise nations around the world, population ageing appears a lightweight in a ring of undisputed heavyweights. However, global demographic trends indicate ageing populations are set to initiate a revolution, heralding a crisis unprecedented in world history. Like other developing nations, Trinidad and Tobago finds itself at the forefront of this phenomenon with 12% (156,000 persons) of its total population aged 60 years and over. Through the development pillar of Vision 2020: Nurturing a Caring Society, programmes have been developed/implemented to treat with elderly issues in the society. Though there is expansive literature about the ageing demographic in developed nations, very little is known about population ageing in the Caribbean region and by extension the developing world. There are issues unique to Trinidad and Tobago that cannot be fully addressed by the traditional First World response, as local research has indicated. This paper provides a comparative framework for understanding ageing in the Caribbean region and its implications for sustainable development. The researchers highlight the challenges and significant gains made with regard to policy in Trinidad and Tobago, and possible areas that may foster a society for all ages.

Keywords: *population ageing; challenges; social security; sustainable development; elderly, Trinidad and Tobago, Caribbean.*

INTRODUCTION

Modern history associates the 1950s with the Cold War and the growing power of the Communist Red Army. But current population trends dictate that the 1950s must

also be remembered for the rise of the 'grey army', which is more popularly known as the 'baby boomers'. Their march throughout the decades from post World War II to the present day has been silent and understated,

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but their conquest has been global, and already one has begun to revolutionise the world. The 'grey army' or the elderly population has been growing steadily since the 1950s according to United Nations data. The proportion of older persons in the world has grown from 8% in 1950 to 11% in 2009, with this figure expected to reach 22% in 2050.

Though this may be considered a human achievement in some regard, largely due to improved healthcare and sanitation, population ageing is well placed to initiate a crisis never before seen in the world. This ageing phenomenon refers to an increasing proportion of elderly persons within an overall population (Kinsella, 1996). Demographers refer to it as the 'demographic transition'—a gradual process wherein a society moves from a situation of high rates of fertility and mortality, to one of low rates of fertility and mortality (Kinsella, 1996). Another operating factor would be the migration rates in a country. This third factor must not be ignored in the case of the Caribbean and, in particular, Trinidad and Tobago.

As this study highlights, the present socio-economic indicators reveal that the system as it is in the region is untenable to bear the exponential growth of the elderly population. Through international mandate and government policy, Trinidad and Tobago has made some provisions for its ageing population. However, the demographic transition is occurring so fast, that it is imperative that Trinidad and Tobago adopt a more proactive approach if it has to successfully meet with this challenge. The reason for this is population ageing carries with it the power to destabilize social, political and economic systems. As one of the more developed countries in a region characterised by a fast growing ageing populace, it is important that Trinidad and Tobago

lead the way in fashioning a response that validates the importance of our elderly population and the part they will play in securing a sustainable future.

The United Nations classify a country as 'ageing' when 10% or more of its population is over the age of 60 years. In 2002, data from the Central Statistical Office in Trinidad and Tobago revealed that 10% of the population was over the age of 60 years. The significance of this finding was that Trinidad and Tobago was a part of that select group of countries within the developing world having an 'ageing population', which is representative of the demographic trend within the region. At present, the elderly population of Trinidad and Tobago stands at 12% or 156,000 persons over the age of 60 years (Central Statistical Office, 2000). According to the UN World Population Prospects (2008), the percentage of persons in Trinidad and Tobago aged 60 years and over is projected to be 17.7% in 2025 and expected to grow to 30.1% in 2050.

DYNAMICS AND CHALLENGES OF POPULATION AGEING IN TRINIDAD AND TOBAGO

The potential support ratio

The Potential Support Ratio (PSR), like the Parent Support Ratio, is a measurement of the intergenerational support in a country (UN, 2008). With regard to population ageing, the PSR addresses whether a country has the human capacity in terms of its labour supply, to maintain their ageing non-working populace. It is measured as the number of persons aged 15–64 years who are able to support a person aged 65 years and over. In 2000, in Trinidad and Tobago the PSR was 10.3 persons aged 15–64, to every person 65 years and older. Trinidad and Tobago can expect approximately 70% or more drastic declines in its PSR

over the next 50 years, with countries like Barbados, Bahamas, Suriname and St. Vincent and the Grenadines also projected to experience declines similar to Trinidad and Tobago (UN World Population Ageing, 2006). The major implication arising from the decreasing PSR in Trinidad and Tobago is the government's likely inability to fund social security programs in the future (Rawlings, 2010). The Economic Commission for Latin American Countries 2007 Report noted that:

Publicly funded social protection schemes are only sustainable when the taxable labor-force is of reasonable size and appropriate tax-collection mechanisms are in place. On the other hand, contributory systems are putting a heavier burden on the individual and its employer. Right now both systems seem to be financially solid; however the growing numbers of beneficiaries will challenge their financial sustainability. Also with an estimated half of the population working in the informal sector quite often, at or below subsistence level, chances are they will never contribute, but at various stages in their lives will need to draw on the support systems. (p.16)

The Caribbean now experiences a ratio of 10 persons aged 15–64 to every person 65 years and older. By 2050, the ratio is expected to decrease sharply to about 3 persons aged 15–64 to every person aged 65 years (UN World Population Ageing, 2009). These projections can be considered problematic, if only one-third of all elderly persons in the Caribbean are receiving one form or the other of government pension (ECLAC, 2004).

In this regard, migratory trends in Trinidad and Tobago should be of major concern, since inter-regional flows have been growing in the last decade, with labour moving from Guyana, and to a lesser extent the Eastern Caribbean States, to Trinidad and Tobago (ECLAC, 2004, p.7). In addition, the

majority of these workers are mostly unskilled agricultural workers or persons working in construction or the service industries. Alternatively, Trinidad's expanded and more affordable education system has resulted in a larger share of skilled workers migrating to developed countries. The PSR is, therefore, compromised in Trinidad and Tobago, especially since the net migration data are not quantified by the Central Statistical Office.

The dependency ratio

The total dependency ratio is the number of persons under the age of 15 plus persons aged 65 years or older per one hundred persons aged 15–64 years (UN World Population Ageing, 1950–2050). It is used to measure potential support needs based on the belief that persons under the age of 15 years and over 65 years will more or less be dependent on the working age population. Trinidad and Tobago's old age dependency ratio is 9.7 and is expected to increase to 44.4% by 2050. The ratio in the Caribbean will increase in 2009 from 10 to 31 (UN World Population Ageing, 2009). The report also noted that the child component in the total dependency ratio will become similar to that of the old-age dependency ratio by 2050. Yet, public expenditure has tended to favour young dependents. The significance of the increase is that government is quite likely to spend an increased amount of money on the elderly in the society as opposed to the smaller base of youth dependents, which will be a significant departure from traditional public expenditure on dependents.

The parent support ratio

The Parent Support Ratio is the other measure of intergenerational support. It is defined as the number of persons 85 years and over to every one hundred persons in the age

group 50–64 years (UN World Population Ageing, 1950–2050). This indicator is significant because it assumes that persons in the 50–64 years age cohort are the caregivers of their parents. According to the UN World Population Ageing (2009), Trinidad and Tobago's current Parent Support Ratio is 4.8. In 2050, this ratio is expected to increase to 19.3 older persons aged 85 years and over to every one hundred persons aged 50–64 years, thus signifying a much larger dependency on the younger generations in the coming years. As noted in a 2004 ECLAC study, most developed countries have programmes and policies that work in conjunction with or completely replace the need for informal support systems. The study further noted that:

Such logistics are generally not in place in the less developed regions as is the case of the Caribbean, where this responsibility is more or less entirely taken on by the family network, quite often supported through an informal community-based support system. (p.21)

In recent years, this form of support has become more challenging for the family. In 2007, ECLAC noted:

Reliance on family and relatives is becoming less and less an option with the socio-economic transformations that have begun to impact on the life styles of people in the Caribbean. Out-migration of the younger generation, increasing full-time employment of females in the formal labour-market and rising costs of living, to only name a few, are making traditional self-help, co-residence with family members and community togetherness no longer a viable option. (p.5)

The decreasing ability to depend on informal networks for support in old age is likely to increase the need for government support in Trinidad and Tobago and elsewhere in the Anglophone Caribbean.

Loneliness

Another area for consideration is the low level of interaction of the elderly in the society. Data from a survey which was commissioned by the Ministry of Social Development highlighted that loneliness was a major cause for concern for elderly persons in Trinidad and Tobago (Camejo, 1999). In an independent study, Rawlings (2008) noted that:

... older persons reported that loneliness for them was one of the most significant concerns. Thirty-three percent of the sample of 845 elderly males and females reported feelings of loneliness. What was also significant... was that though many individuals were lonely, only 16% lived alone. (p.7)

This finding reveals that although the majority of those in the study, who reported being lonely, lived with other household members, a low level of interaction with the elderly could be present also in families/households. A brief report in the American Journal of Psychiatry (2005) noted that depression in old age was strongly correlated with loneliness (p.178, Vol. 165). If loneliness is to be deemed a quality of life indicator, then in the future a significant segment of the older population could suffer from a decreased quality of life, in their later years, if current lifestyle trends to continue unchecked. Loneliness could, therefore, become a human rights issue also, since the equal right to happiness should be secure and attainable irrespective of age.

Life expectancy

The average life expectancy in 2009 among the elderly in Trinidad and Tobago is 74.8 years. This figure is projected to reach 78.6 years in 2025 and increase to 80.5 years in 2050 (UN World Population Ageing, 2009). On average, the life expectancy throughout the Anglophone Caribbean is similar, with an average life expectancy of

75.5 years in 2025 increased to 77.6 years in 2050. This is considered a positive consequence of advancements in technology and biomedicine, which have increased life expectancy in the young and the old. A report by Yeobah (2002) stated that the Caribbean region has been so successful in addressing issues of mortality, fertility and population growth that international funding agencies are reducing their financial support for its population activities. The report further explained that as a result, governments would have to face an increased demand for healthcare and geriatric services to serve the ageing populace.

The 2000 Census of Trinidad and Tobago revealed that diabetes, hypertension, arthritis and heart disease were the leading causes of hospitalisation and mortality. As it stands, the medical system has not been engineered to support the specific demand of elderly patients and the chronic illnesses from which they suffer. The World Health Organisation (WHO) estimates that long-term therapy for chronic illnesses is only 50% in developed countries, and is even lower in developing countries (WHO, 2003).

Another variable within the life expectancy indicator is the feminisation of the elderly population. In Trinidad and Tobago, women on average currently have a life expectancy of 75.1 compared to 66.7 for men (World Population Prospects: The 2008 Revision Population Database, 2008). This is on par with the life expectancy patterns between the genders in other parts of the Caribbean and by extension the world where women are expected to live longer than men. Such a disparity in the genders points to the fact that there is need for a gender-based approach that would examine how the physiological and socially constructed differences between men and women determine different health needs and outcomes (Eldermire, 1997).

Labour force participation

In the Caribbean, as it is in other parts of the world, male participation in the labour force exceeds that of their female counterparts in all age groups. Data on illiteracy rates from UN World Population Ageing (2009) show a distinctly negative gender bias towards women, which is more pronounced in the 'young-old' (60–74) and the 'oldest-old' (85+) categories. Various research studies have contended this has been the result of less socio-economic opportunities for women such as education, and explain why fewer women are employed in the formal sector and over represented in the informal sector. This observation is supported by the Caribbean Health Research Council Report (2008), which stated that women are most likely to be left out from pension schemes since they have worked either at home or in the informal sector (The Caribbean Ageing Project CHRC, 2008).

What this alludes to is that women are largely dependent on the men in their lives who are dying relatively younger, and on a smaller network of family members due to lower fertility rates and migrating children. In the 2009 study, Rawlings noted that many elders reported having to make major sacrifices as they could not meet their financial needs and as much as 41% of women stated that the family was an important source of income. This pointed to the inadequacy of the financial arrangements for elderly citizens in Trinidad and Tobago.

FIRST WORLD RESPONSE

For the purpose of this study, the researchers have used the United States to represent ageing trends in the developed world. The two-fold reason for this is that in recent decades there has been a cultural shift in the Caribbean towards American norms and values, which have punctuated the West Indian cultural fabric. Additionally, migratory patterns have also

exacerbated the ageing phenomenon, and have significantly impacted the ageing issue in the region. Trinidad and Tobago's pluralistic society also could serve as a microcosm of America's culturally diverse population.

Similar to the developing world, the growth rate of the American population has slowed as a result of the decline in the fertility rate while its proportion of elderly persons has grown due to increased life expectancy (UN World Population Ageing, 2009). This group of elderly Americans currently comprises 17.9% of the population and is growing at a rate of 2.7% annually, which is faster than the entire population growth rate of 1.0%.

This means that the PSR per person in America between the ages of 15 and 64 years has decreased and is becoming a major concern for the United States as the 'baby boomers' generation (of persons born between 1946 and 1964) begin to retire in 2011. By 2025, the PSR is projected to fall to 3.4%, and will further decrease to 2.9% in 2050 (UN World Population Ageing, 2009). The result is a growing fiscal gap and future problems for social security support. The present financial crisis makes this clear in a comparative study of the costs related to the fiscal crisis and to those related to population ageing. In addressing the issue of ageing populations in the developed world, the International Monetary Fund (IMF) opined that the recent global financial crisis was a featherweight compared to age-related spending. Comparing the costs of the financial crisis it noted that:

... in the longer term these costs will be dwarfed by age-related spending. Looking ahead to the period between now and 2050, it predicted that for advanced countries, the fiscal burden of the crisis [will be] about 10% of the ageing-related cost. The other 90% will be extra spending on pensions, health and long-term care. (The Economist, 2009)

A notable element in this dependency issue is the divergence between the 'young-old' and the 'oldest-old'. In the United States, the 'oldest-old' account for 3.8% of the population and are growing at a faster rate than any other age group. The United Nations further indicated that approximately 12 million Americans are over the age of 80 years and this figure will increase to 32 million in 2050 (World Population Ageing, 2009). This means that more financing and a lot more policy initiatives would be required to increase and improve long-term care facilities as the 'oldest-old' become more frail.

The Centre for Strategic and International Studies (CSIS), a think-tank in Washington, DC, calculates that if nothing is done, the cost of state pensions in developed countries will almost double, from an average of 7.7% of GDP presently to about 15% by 2050 (The Economist, 2009). The report also noted that if things remain the same public expenditure on healthcare would also rise steeply, so by 2050 the developed world would be spending nearly a quarter of its GDP on pension and health. The United States and the rest of the developed world are left with few options to deal with the demographic transition.

The United Nations

The United Nations has been monitoring the demographic transition since the 1950s and hosted the First World Assembly on Ageing in 1982 in Austria (Resolution 37/51). The recommendations of this Assembly first required that governments of developed countries, in particular, take primary responsibility for ageing by implementing the recommendations of the Vienna International Plan of Action. Largely due to ad hoc social programmes for older persons and faulty indicators to measure its ageing population,

Trinidad and Tobago's response to this First World mandate was tardy.

In 2000, Trinidad and Tobago's government, in response to comments that were made at a local symposium held in 1999 on the status of social welfare issues in Trinidad and Tobago, embarked on the formulation of a National Policy on Ageing. The policy was based on the principles endorsed by the United Nation's *Vienna International Plan of Action on Aging* 1982 (Resolution 37/51), and the United Nation's Principles for Older Persons promulgated in 1991-care, independence, participation, dignity and self fulfillment. The first draft of the national policy on ageing was subsequently completed in July 2001. (Rouse, 2004)

In accordance with the recommendations of the 1982 Vienna Plan of Action on Ageing, governments were required to: (i) take primary responsibility for ageing through implementing the recommendations of the International Plan of Action, (ii) mainstream ageing by introducing it into national development frameworks to be championed by the different groups in the society; (iii) create an environment through democratic rule and human rights for all to foster positive change in the lives of the elderly, (iv) encourage the role of NGOs in treating with elderly concerns, (v) create agencies and committees to highlight ageing in the society and facilitate the opening of elderly persons organizations and (vi) implement national data collection and analysis to facilitate policy planning.

Madrid International Plan of Action on Ageing (MIPAA)

In 2002, Trinidad and Tobago became a signatory to the United Nation's Second World Assembly on Ageing in Spain, out

of which the Madrid International Plan of Action on Ageing was produced, to serve as a blueprint for government in the developing countries. Since then, the government has embarked on various projects and championed various initiatives to improve the lives of the elderly in the country, with the hallmark establishment of the Division of Ageing in 2003 in the Ministry of Social Development. The division serves as an umbrella agency to focus ageing initiatives in Trinidad and Tobago.

In addition to the recommendations of the Vienna Plan of Action, MIPAA detailed growing areas of concern for older people such as HIV/AIDS, violence and abuse, and access to health services and social protection.

CHALLENGES FACED IN TRINIDAD AND TOBAGO

Income and social security

In Trinidad and Tobago, there are mainly two pension systems available: contributory and non-contributory plans (ECLAC, 2003). Contributory pension systems provide income for post-retirement years for those who have contributed financially over a certain period of their working lives, which takes the form of National Insurance Scheme (NIS) social security benefits. However, informal sector workers, the self employed and those who never worked are excluded. Non-contributory pension systems supply income for retirement to public sector monthly-paid workers; and public assistance in the form of old age pension (OAP) is paid to eligible beneficiaries aged 65 years and over. Generally, broad entitlements are offered to the latter but are quite often not well targetted (World Bank, 1996).

According to Rouse (2004), there were administrative problems that arose from

the operation of the two schemes (OAP and NIS), such as: (i) inadequate funding to meet expenditure for pension payments to OAP recipients, (ii) complaints from pensioners about not receiving their checks on a regular and timely basis from the postal system, (iii) delays of up to 8 months between application for benefit and actual payment to pensioners, (iv) overcrowding of banks and post offices during the first week of each month by pensioners, (v) the anomaly of the non-contributory OAP paying higher benefits than the contributory NIS, (vi) considerable overlap with the clientele of OAP and NIS due to the qualifying threshold, (vii) the fraudulent cashing of checks after the death of pensioners and (viii) the increase in the number of pensioners accessing the OAP was not met by a corresponding increase in staff at the Social Welfare Division to deliver an efficient and timely service.

At present in Trinidad and Tobago the welfare system is based on a means-test approach, on which pension experts report that income testing is administratively difficult and can stigmatise its recipients/beneficiaries (Help Age International, 2006). The alternative to the existing pension format is a universal age based scheme. Since 2001, Latin American and Caribbean countries have made gradual efforts to increase pension coverage and quality, however there are persistent inequities and inequalities that call for more far reaching public policy decisions to expand protection to the entire population (ECLAC, 2006).

Health protection

According to ECLAC (2006), Latin American and Caribbean countries are facing both old and new challenges in the field of health policy. The latter relate to changes in demand that require new services and treatments, while the former have to do with

the region's shortcomings in terms of equal access to timely and quality health services, lack of human and financial resources and problems of articulation between the various levels of the healthcare system and the public and private sectors. Through empirical data it has been revealed that there is a major need emerging in the society for increased primary healthcare.

Increasing life expectancy is undoubtedly a sign of social and economic development. However the quality of years is even more important. If medical treatments postpone deaths from chronic conditions but do not delay the onset of the conditions themselves or their disabling consequences, the result could be an expansion of morbidity and disability over the life course of individuals. (United Nations, 2007)

Most studies undertaken in the Caribbean reiterate that as an individual grows old the prevalence of chronic non-communicable disease conditions such as heart ailments, Alzheimer's, cancer and diabetes increase (National Policy on Ageing for Trinidad and Tobago, 2006). However, little attention has been placed on the provision of primary healthcare as opposed to secondary healthcare in Trinidad and Tobago. The situation is further exacerbated by the migration of the young and middle-aged cohorts of the population to North America and Europe, which leads to the concomitant decline of care giving and by extension primary healthcare.

To date, the main programme that is geared towards providing homecare to the population of the elderly in Trinidad and Tobago is the Geriatric Adolescent Partnership Programme (GAPP). This programme was developed in 1993 as a pilot programme under the aegis of the Ministry of Community Development, Culture and

Gender Affairs, to bridge the gap between young people aged 17–25 years and older persons, through training and provision of services in geriatric care. The demographic context within which the programme emerged provided the main rationale for its development, since alongside a growing elderly population there also existed a large group of unemployed high school graduates.

But, in spite of administrative constraints, there was a positive impact on 90% of those older persons who received care from trainees, and a corresponding sensitisation of 90% of the trainees who completed the course.

In addition to a dearth of primary health-care facilities, another challenge was the inadequacy of elderly care institutions in the country. It is estimated that approximately 1% of older persons live in institutions designed for the elderly (Camejo, 1999). The administration and delivery of care to the elderly at any Home for the aged cater for four or more persons and currently operate in accordance with the amended Private Hospitals Act No. 12 of 1989 Chapter 29:03. While the Act outlines the conditions to operate a Home, Camejo's survey showed that many of the stipulated conditions were not always adhered to.

The Private Hospitals Act is to be superseded by the Homes for Older Persons Act No. 20 of 2007, which is proposed for proclamation. This legislation will regulate and monitor all Homes and elderly care facilities through the establishment of an inspectorate, which will ensure that international standards of care are enforced.

Specialised care for older adults is in the early stages in the region's countries (ECLAC, 2007). Primary healthcare targets older persons with some level of dependency

and includes a series of actions carried out in the older persons' residence to enable them to remain living at home in their usual environment. One of the main advantages of these services is that they reduce institutionalisation and hospitalisation costs while slowing down the deterioration functions associated with old age. The need for a provision of primary healthcare by the state relates to changes in demand due to an ageing society. It would require new services in healthcare in order to promote health and well-being into old age.

Socio-economic

The access to home improvements for the elderly in Trinidad and Tobago varies in degrees according to their geographic locations. In Latin America and the Caribbean, the striking unevenness in the demographic transition between urban and rural areas has resulted in a more intense ageing process in the former (ECLAC, 2007). Recent statistics show that one of the main needs of the elderly population in Trinidad and Tobago relates to housing, as evidenced by numerous requests of the elderly for home repairs through the Division of Ageing's Help Desk.

Thus, the ageing process is taking place in a context of housing shortages and problems with basic housing and living conditions. Housing and its environment strongly influence older people's quality of life, both in the objective spheres of living conditions and assets and in the sphere of subjective or perceived well being (CELADE, 2003). Housing and local environment policies should, therefore, be designed on the basis of a renewed vision of social inclusion for all, and housing programmes for both rural and urban areas could, therefore, play a significant part in helping older people to develop a fuller range of activities and social contacts.

Undue financial pressures are often placed on grandparents who parent their grandchildren primarily due to migrant parents (ECLAC, 2003). According to Camejo (1999), 75% of the elderly depend on OAP for their economic well being. Despite being dependent on pension, the elderly have proven to be major players in the social support system in the Caribbean since women who are regarded as the *de facto* caregivers of the elderly have joined the workforce in increasing numbers. Yet, the elderly often face employment difficulties to re-enter the job market largely due to ageism (i.e., discrimination against the elderly) and in some instances are challenged by technological advancements. In Trinidad and Tobago, migration of young and middle aged cohorts particularly to North America and Europe could impact negatively on the nation's aged. Certain island nations, for example, have experienced a combination of working-age adults, immigration of elderly retirees from other countries and return migration of former emigrants who are above the average population age: all three factors contribute to population ageing (Kinsella, 1996).

Investigations revealed that of growing significance in Trinidad and Tobago is the alarming increase of HIV/AIDS cases, and the economic and social impact on the nation's ageing. This phenomenon is shown to cause epidemiological concerns as well, since it impinges on the mortality and morbidity rates, which are another component of population ageing. Trinidad and Tobago is headed towards economic and social crisis if HIV/AIDS infection trends continue. With the most economically active and productive population groups being the most affected by the epidemic, severe social and economic repercussions are inevitable. A macro-economic study by local Prof. Karl Theodore (2001) predicted by 2005, stated that the impact of HIV/AIDS would reduce

the country's gross domestic product by 4.2%, its savings by 10% and its investment by 15.5%. Estimates placed 2.5% of Trinidad and Tobago's sexually active population between the ages of 15 and 35 as living with the disease. In more recent media reports, homicide, drug abuse, vehicular accidents, incarceration and social displacement are some of the major issues affecting the male population aged 15-45 years, which could also negatively impact the number of potential caregivers in society.

DEVELOPMENTS IN POLICY

Income security

The drive for income security has been ongoing in Trinidad and Tobago for the past 10 years. As mentioned earlier, retired public officers benefit from a non-contributory pension scheme and contributory social security pension, while the government has made periodic increments to the Senior Citizens Grant (formerly known as Old Age Pension) as shown in Figure 1. The increased expenditure reflects both an increase in the number of beneficiaries and also an increase in the dollar values of the grants.

In 2008, an increase in the minimum National Insurance Pension to \$2,000 monthly was achieved and served to benefit 60,000 pensioners. In making an analysis of the computation of the government's pension structure, a comparison of the amounts is made in relation to the national poverty line.

The Senior Citizens Grant falls within a large enough safety net from the poverty line to indicate a relatively low level of indigence and poverty amongst the elderly in Trinidad and Tobago. In 2010, Trinidad and Tobago issued another increase in the Senior Citizens Grant, which shifted the minimum quantum upward to \$2,500 monthly.

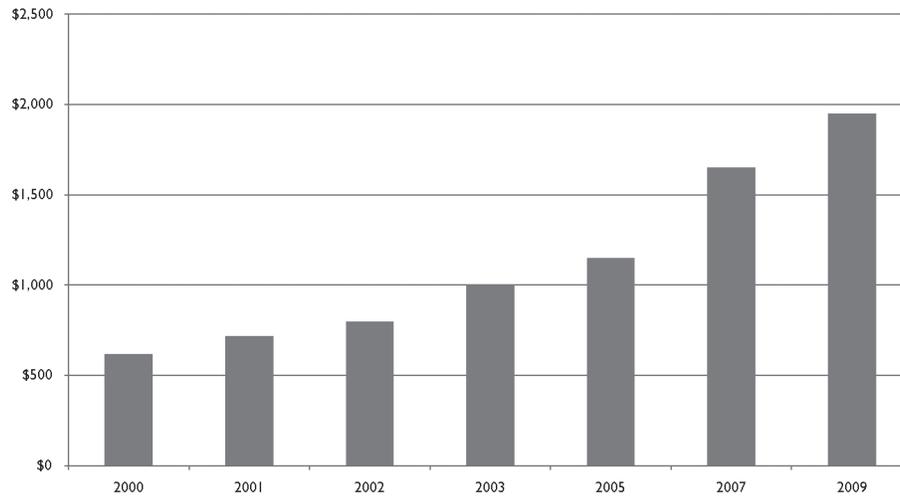


Figure 1 Increase in Old Age Pension 2000–2005 and Senior Citizens Grant 2007–2009

Source: SSIP_ documents 2010, Trinidad and Tobago

Health and social support networks

The developments with respect to healthcare for the ageing population are increasingly beneficial. There have been improvements in fiscal spending towards healthcare for the elderly over the past 10 years in that both primary and secondary healthcare have had increased funding of existing programmes as well as the creation of new ones. One of the most heavily subscribed programmes to date is access to free medication for persons afflicted with chronic illnesses under the Chronic Disease Assistance Programme (CDAP).

The Senior Activity Centres Programme was established in 2005 as a component of the Continuum of Health and Social Support Services for older persons, which intends to foster independence among older persons. The centres are multi-service facilities, which address the social, emotional and health needs of older persons aged 55 years and over by encouraging their personal growth and independence.

They are operated by Non-Governmental Organizations (NGOs) in partnership with the Ministry of Social Development, and are in receipt of annual subventions.

In accordance with its mandate, the division of ageing has been actively involved in promoting public awareness on ageing on a national scale, through its annual Public Open Fora for older persons in various communities; annual observance of World Elder Abuse Awareness Day on 1 June; and annual commemorative events for International Day of Older Persons on 1 October. A National Policy on Ageing was launched in 2007, the goal of which is to advance the well being of older persons in a sustainable manner and provide older persons with the opportunity to be integrated into the mainstream of society.

However, there are other social programmes which do not specifically target older persons, but because of their structure, older persons are also beneficiaries.

The Social Welfare Division in the Ministry of Social Development is charged with the responsibility for the equitable, transparent and timely provision of services to meet some of the social and financial needs of the less fortunate members of society. Among the services from which the elderly benefit are public assistance, food subsidy, free bus passes, free eyeglasses, free hearing aids, free wheelchairs, burial assistance, urgent temporary assistance, dietary grant, housing grant, clothing grant and the purchase of household items. The Social Welfare Division, together with the Housing Development Corporation (HDC), provide home improvement assistance and most of the beneficiaries are the elderly.

There are a number of NGOs whose programmes are beneficial to the elderly. One such organisation is the St. Vincent de Paul Society (SVP), which is operated and managed by the Roman Catholic Church. This organisation, in addition to operating Homes for the elderly, also provides food baskets to the needy, including the elderly. Some of the other NGOs which impact the elderly with the provision of goods and services include the Foundation for the Enhancement and Enrichment of Life (FEEL), the Trinidad and Tobago Association of Retired Persons (TTARP), the Alzheimers Association, the Soroptomist International and the Coterie of Social Workers.

RECOMMENDATIONS FOR A WAY FORWARD

The following are the recommendations to overcome the problems faced by the elderly:

- **Developments in Social Security**

In addressing the social security needs of older persons, the key strategy would be to devise mechanisms to ensure that the dignity

of older persons is maintained while accessing the benefits of the social security system.

- **Developments in Income Security and Employment**

Sustainable purchasing power is a foremost concern of individuals as they approach their senior years, and declining options in the job market and fixed income status become realities. In this regard, there will be initiatives involving collaborative efforts among relevant agencies.

- **Developments in health**

Training in geriatric care for family members, care providers and healthcare workers should be enhanced; community healthcare services should be strengthened and a regulatory framework should be established by government to ensure that quality standards of care for the elderly are provided in public/private care facilities.

- **Developments in social support for the elderly**

Initiatives for older persons to acquire affordable property or access to support should be promoted, legislation should be provided to combat various forms of violence and abuse of the elderly and mechanisms should be established to assist the elderly in care-provider roles.

CONCLUSION

It has been demonstrated that the traditional First World response to population ageing classifies the phenomenon primarily as an economic issue, given the stress exerted upon the social security and healthcare systems and immigration policies as three areas negatively impacted by the challenges of an ageing population.

The situation in Trinidad and Tobago, however, is more multi-faceted. There are needs that are specific to this country's elderly that must be dealt with at social and cultural levels using a participatory approach involving older persons themselves. The agencies responsible for societal development must, therefore, seek to ensure that issues associated with ageing and older persons are integrated into national development plans which are culturally sensitive. Continuous review and evaluation of social and legislative policy objectives, and the measures outlined in policy will be essential components of the activities of the various state agencies charged with the responsibility of national development. This is to ensure that the relevance and effectiveness of the National Policy on Ageing are not compromised.

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