

ג'וינט ישראל  
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**Policy Issues in an Aging Society**

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**Jack Habib**

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## Policy Issues in an Aging Society

Jack Habib



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## **Abstract**

"Policy Issues in an Aging Society" appears as a chapter in Demographic and Socio-Economic Aspects of Population Aging in Israel, a monograph prepared by Israel's Central Bureau of Statistics (CBS) in collaboration with the JDC-Brookdale Institute of Gerontology and Human Development. It is part of an international effort coordinated by CICRED (The Committee for International Cooperation in National Research in Demography), to provide a comprehensive description of trends in population aging and the demographic, economic, social and health characteristics of the elderly in countries throughout the world.

Among the issues examined in the summary chapter which is presented here are: the share of the elderly in public expenditures; the role of the family in providing support for the elderly and the balance between family and state support; the roles of the elderly in late-life employment and voluntary activities, and the implications of the broad range of ethnic diversity among Israel's elderly, many of whom are immigrants, for entitlements and access to services.

## 8 Policy Issues in an Aging Society

This report describes the rapid process of aging in Israel and significant changes in the elderly population and family networks. It emphasizes the variation in the ethnic backgrounds of the elderly and details the differences between ethnic groups on a wide range of variables. It notes the unique importance of immigrant status among Israel's elderly. The high rate of labour force participation of Israel's elderly and the unusually strong pattern of family support in Israeli society also distinguish this population from similar elderly populations elsewhere.

A number of basic policy issues - some of broad universal relevance and some of particular importance in Israel - emerge:

1. How does population aging affect society's ability to sustain current support levels?
2. What should be the role of the family in the support of the elderly and what is the most effective balance between family and state support?
3. How can the elderly best be integrated into society so that they make a productive contribution and find self-fulfillment in the process?
4. What are the specific challenges posed by the heterogeneity of Israeli society and the immigrant status of many of its elderly?

### 8.1 Public Support

As the percentage of elderly in the population has risen, so has their share of total public expenditures. Recent estimates show that the elderly account for 25% of total expenditures in Israel, 40% of income maintenance expenditures and 29% of health expenditures (Kop, 1987). The increase in absolute expenditures for the elderly and in their share of total expenditures raises two basic questions: In an aging society, are constant levels of support for the elderly sustainable? And, to what extent does the aging process bring about a general increase in expenditures, which imposes an overall economic burden? Concern about expenditures for the elderly is associated with the rise in the elderly dependency ratio. In Israel, the elderly dependency ratio (65+/20-64) has increased from 10.3 in 1961 to 17.6 in 1990. In many countries, concern with the level of expenditures for the elderly and changes in the dependency ratio have led to a sense of crisis, which has developed in the context of general concern about the level of social welfare expenditures. However, this concern fails to take into account the broader impacts of population aging: a decline in the percentage of children, and a general decline in total dependency ratios (although this depends on the specific characteristics of the aging process in each society).

In Israel, the child dependency ratio (0-19/20-64) has declined from 82 to 80 between 1961 and 1990. However, the total dependency ratio has not declined as part of the aging process, and has even risen somewhat. There has been a shift in the composition of dependents, with the elderly increasing their share of total dependents from 11% to 18% (see Chapter 2). Even when the dependency ratio declines, the aging process is generally associated with some degree of increase in total expenditures - a result of the higher expenditures per capita for the elderly rather than on children (Habib, 1990).

It would be expected that the rise in the total dependency ratio, as the population ages, would lead to an increase in total required expenditures per capita. The actual burden implied by the changing age structure depends not only on the translation of the changing age structure into the need for public services but also of the working-age population into actual labour force participation. The overall rate of labour force participation among the working-age population has not changed significantly since the early 1960s - 57%; consequently, expenditures per working-age population, we can assume, have increased significantly. However, the aging process itself need not affect labour force participation. The change in the age structure of the working-age population could increase or decrease the rate of labour force participation depending on the relative rates of younger age groups (20-30) vs. older age groups (55-65). Moreover, there is likely to be a rise in female labour force participation associated with the decline in fertility which is in itself one of the underlying causes of the aging process.

Calculations of the changes in public expenditures that will be associated with the changing age structure have been made up to the year 2005. During this period, significant improvement in the total dependency ratio is expected, although the percentage of elderly among total dependents will increase to 25% in 2025. Thus no major changes in the burden of expenditures associated with changes in the population structure are expected. Any further population aging will only occur around the year 2015. By 2025 the percentage of elderly will rise to 11% but the dependency

ratio will remain stable. Clearly there will be some increase in the share of the elderly in total expenditures. On the other hand, it is unclear how much total required expenditures per capita will increase at that time.

An important additional factor is that the aging process implies significant changes in the composition of expenditures, such as shifts in spending between the education and health sectors, or shifts within each of these sectors: from child allowances to old age pensions and from expenditures for children's health services to expenditures for elderly health services. If a society is not flexible enough to implement these structural shifts, then the aging process is likely to lead - at least in the short run - to a need for increased expenditures for the elderly without decreased expenditures for children. Such inflexibility could also lead to manpower surpluses in services for children, excess capacity, and manpower shortages in services for the elderly. The need for a shift in expenditures will also require reallocation of new capital and new uses of existing capital. For example, underused school buildings will need to be reallocated to other uses. The resulting transition costs will have to be considered. An analysis based solely on total expenditure needs would thus underestimate the true implications of population aging. The need to reallocate resources is one of the major challenges to public policy for aging societies.

In Israel, there is evidence of the strain associated with such transitions. For example, there is a severe shortage of long-term care beds for the elderly, despite a decline in the demand for psychiatric and acute beds. Efforts to transfer beds have not always been successful. In addition, while preventive services for children have been highly developed, efforts to convert well-baby clinics into general family clinics that will also deal with the needs of the elderly have been only partially successful. And although some existing buildings have been converted to meet the needs of the elderly there are still many examples of underused structures that have not been reallocated.

At the same time, more and more attention has been given to expanding public services for the elderly. Pension system coverage has increased significantly. In the 1980s a range of services was rapidly developed. Geriatric departments have been developed in most general hospitals, long-term care beds for the elderly increased more than 50% over the decade, long-term community care has been expanded dramatically in association with the new Community Long-term Care Insurance Law and a network of day-care centers was developed. Israel is in the midst of reallocating its resources and restructuring public budgets to meet the shift in the age structure of its population (Factor et al, 1988a; Cohen, 1988; Cohen and Antler, 1985).

## **8.2 The Role of the Family and the Balance Between Family and State Support**

In Israel, the family plays a major role in support of the elderly. Indeed, until recently the family was the major source of support, both for disabled elderly who live with family members and for those who live separately.

At the same time, the number of disabled elderly in need of care has been increasing dramatically as a result of the increases in the overall elderly population and changes in its composition. Increases in the share of old-old women and elderly from Asia and Africa have all contributed to a rise in the rate of disability. In the 1980s alone the share of elderly disabled in personal care (ADL) was estimated to have increased from 10% to 12% of the total elderly population (Factor, Habib and Be'er, 1988a).

There has been an ongoing public debate in Israel about the appropriate expectations from the family. A number of studies have revealed that family caregivers are over-burdened, and that it is difficult for many of them to maintain or sustain their existing level of care (Habib et al, 1986; Morginstin and Shammai, 1988; Krulik and Hirschfeld, 1984). Because the rate of institutionalization is low in Israel, very disabled elderly often remain in the community increasing the burden on family caregivers. In contrast, studies have also shown that many of the elderly who enter institutions could remain in the community if community services were available on a broader basis (Habib et al, 1986).

In addition, the decline over time in fertility is gradually reducing the average number of children available to the elderly as potential supporters. It is also argued, although there is no concrete evidence, that the family's willingness to provide support is on the decline, particularly as more and more of the daughters enter the labour force.

In response to these concerns, a consensus on the need to expand community services was reached. In April 1988, Israel adopted a long-term care insurance law within the national social security framework (Social Security, 1988), that provides entitlement for home-care services of between 10 to 18 hours per week for the severely disabled. This law, designed to supplement existing sources of finance for home care, led to a four-fold expansion in the recipients of community services. As a result, the percentage of disabled elderly who need and receive personal care

has increased from about 12% in the early 1980s to about 50% toward the end of the decade (Factor et al., 1988b). Moreover, almost all severely disabled elderly receive home-care benefits as a result of this law. Though the expansion of this law has significantly redressed the balance between the family and the state, it is probable that the majority of care is still provided through families. Thus the adoption of the new law has neither eliminated the family's responsibility nor made it feasible for the family to abandon its role.

In Israel, as opposed to other countries, the Community Long-Term Care Insurance Law has established the principle that all families caring for severely disabled elderly should receive some degree of support, whereas in other societies the focus of home care has been more on the elderly with little or no family support. However, the present situation in Israel has created an imbalance between the severely disabled and the moderately disabled. Support for moderately disabled elderly who do not have family, or who cannot expect their families to care for them, must be expanded.

Another critical issue addressed by the debate over the development of the law was whether a cash payment should compensate family members who choose to provide care themselves, rather than purchase services. This approach was rejected; the law is based on providing actual services, and family members are not remunerated. The level of cash benefits was considered both in principle (whether monetary compensation might provide incentive for inappropriate care) and in practice (the cost of compensation for community care).

It was also concluded that the rate of application for an entitlement program within the social security system is likely to be much higher than in other programs; indeed, receipt of benefits was almost universal in contrast to limited receipt of programs that had existed previously.

A number of studies are now underway to evaluate the impact of the Community Long-Term Care Insurance Law on family-helping patterns; it is hoped these will shed more light on the situation in Israel after the law, and on the implications of such legislation. The Israeli law represents one of the first attempts to introduce entitlement to home-care benefits.

Against this background of expanding community services, there continues to be a commitment to expand institutional services in response to the increase in the number of disabled elderly. As a result of this increase, a rapid increase in the number of beds has been required just to maintain existing institutional patterns by age, sex and ethnic origin. At the same time there is an ongoing debate as to whether the supply of institutional beds should continue to increase as the demographics in the years ahead would imply or whether the expansion of community services will make it possible to moderate the increase in institutional solutions.

Will the family's ability to provide the majority of care continue in the future? As noted earlier, changes in fertility rates will bring about a reduction in the number of children per elderly person. The family support ratio (ages 75+/45-59) rose dramatically from 10 in 1961 to 33 in 1990 (see Chapter 2; Sabatello 1989). On the other hand, a comparison of the 1967 (Weihl et al., 1970) and 1985 National Survey (CBS, 1987a; Habib and Sundstrom, 1988) of the Elderly reveals no change in the percentage of childless elderly and the percentage of married elderly has increased. Moreover, spouses continue to be a major source of family support. According to some studies, approximately 40% of all primary informal caregivers are spouses (Habib et al., 1986). Furthermore, a large percentage of care providers are children who are themselves retirees who have free time and are in good health. Another phenomenon that enhances potential support is the increasingly younger age at which the empty nest is experienced, as a result of having fewer children (Matras, 1986).

### 8.3 Roles of the Elderly in Society

In addressing the question of roles we must examine the elderly's contribution in paid employment, in organized volunteer efforts, in the family, and in the community - from the perspective of society and from the perspective of the elderly.

The aging of the population, increased life expectancy of the elderly at age 65, and claims that successive cohorts of elderly are healthier, better educated, and less disabled, all question the wisdom of compelling the elderly to retire from principal places of employment at a fixed age or of encouraging such retirement with economic incentives. Actual retirement trends have been contradictory (Habib et al., 1989a).

**Continued employment:** In Belgium and France, older workers have been induced to retire in an effort to deal with unemployment while, in the U.S. and Canada, the worklife has been extended by cancelling

mandatory retirement and raising the pension eligibility age. In Israel, there is a new law allowing women to work until age 65.

- **Macro-economic conditions:** While in some countries unemployment makes it difficult for older workers to find jobs and creates pressure for early retirement, in Eastern Europe or in England a growing labour shortage is providing new work opportunities and pressuring older workers to continue working.
- **Employer policies:** On the one hand, employers want trained and experienced personnel and are thus willing to invest in older workers; on the other hand, the urgent need to retrench due to the economic situation encourages employers to try to cut expenses by getting rid of costly older workers. The employers offer generous early retirement conditions to older workers in order to cut staff. However, it is increasingly difficult to finance these benefits, and those who retire are not necessarily those whom the firm hoped would retire.
- **Technological progress:** While some changes greatly reduce the amount of physical effort required, thus making work easier for older workers, productivity changes reduce the overall need for workers, and technological changes can cause skill obsolescence, particularly among older workers.
- **Research findings on attitudes toward retirement:** Some studies have indicated a "retirement crisis" characterized by the desire to continue working, while other studies have indicated that many retirees show no interest in returning to work and adjust well to retirement.
- **Workers' personal characteristics:** Today, more older workers are better educated and in better health. Work has become important to women and, in Israel, the number of workers who speak Hebrew and who have accumulated work seniority has grown, all of which contribute to continued employment. On the other hand, a growing number of workers are eligible for better pensions, which contributes to earlier retirement.
- **In Israel, the rate of employment of the elderly is still relatively high by international standards (see Chapter 6.2).** There are a number of possible explanations: low levels of pension entitlement, lower rates of unemployment (until recently), and a stronger societal emphasis on work as a source of status. Moreover, the trend toward early retirement is not nearly as advanced here as in other countries and the vast majority of those aged 55-65 is still in the labour force. In the 60-64 age group for men, for instance, European countries have much lower employment rates than Israel. Whereas 70% of Jewish men aged 60-64 are in the labour force in Israel, only 27% of this population is employed in France, 32% in Germany, 53% in the UK, and 36% in Holland (Habib and Matras, 1987).

In 1987, 75% of men and 28% of women in the 55-64 age group worked. However, there has been a significant decline from the peak of 91% for men 60-64 in 1966 (Israel Central Bureau of Statistics, Labour Force Surveys). The most drastic decline has been since 1981. Though there has been no analysis of the causes, there seem to be three underlying forces:

1. Macro-economic policies.
2. Structural changes in the Israeli economy that have been promoted by a basic shift in government policy toward subsidization and protection of declining industries.
3. Expanded availability of early retirement and disability benefits.

In addition to promoting non-employment, this trend has also enhanced the degree of job change, which may have negatively affected many workers who are still employed. It has also changed the nature of the social contract: workers who never believed they would face job insecurity in their later years are finding themselves out of work. Moreover, those who remain employed are subject to greater insecurity and anxiety.

Are these trends likely to continue? There is conflicting evidence. On the one hand, more of those reaching retirement have experience in the Israeli labour force. They know Hebrew, and they may be healthier and better educated than in the past. There is evidence of a very positive relationship between education and labour force participation in older age groups. Of those with very little schooling in the 55-64 group, less than two-thirds were in the labour force, compared to about 93% of those with 16 or more years of education (Habib and Matras, 1987). After age 65, this relationship is even more pronounced: only less than 20% of those with the least education levels are in the labour force, while one-third of those with a high school or higher education are in the labour force (see Chapter 6.2).

On the other hand, the elderly now have higher pension entitlements, fewer dependent children, and a generally improved economic situation. Thus they have less motivation to work. At the same time, labour market conditions will play a major role, as will the demographics of future cohort sizes. Should we make vigorous efforts to stem the trend toward early retirement, reverse the trend toward decline in participation, and expand employment opportunities for the elderly?

Listed below are some factors in favour of late-life employment:

**At the macro level:**

1. Concern with the rising cost of pensions is further exacerbated by early retirement. Pension expenditures are expected to rise from 8% to 20% of GNP; there is a great deal of concern about potential actuarial deficits as entitlements mature (Vermus, 1984).
2. A strong commitment to the importance of economic growth would mandate the full utilization of the potential labour force.

**At the firm level:**

1. There have been consistently positive evaluations of older worker performance. Handeles (1982) and Biber (1989) found that employers perceive older workers as better able to fill positions of responsibility; they have less absenteeism, and show greater work commitment than younger workers.
2. Firms may face shortages in certain areas that can be met by continued employment of older workers.

**At the employee level:**

1. Studies of pre-retirement-aged workers in Israel indicate a great deal of interest in being employed, although many are interested in part-time work as an addition to their pension.
2. Employers consistently give a negative evaluation of older workers' ability to learn new skills. However, studies have consistently shown that older workers can continue to learn and learn well, especially with the aid of special training methods (Doering, Rhodes and Schuster, 1983).
3. The percentage of those having a pension and the percentage-pension received are very low.
4. The period of healthy retirement is growing due to continued increases in life expectancy and better health.

Listed below are some factors against late-life employment:

**At the macro level:**

1. Increasing redundance, scarcity of employment, and decreasing manpower needs due to technological advances cause "marginalization" of jobs and employees.
2. Mandatory retirement opens new jobs for younger workers.

**At the firm level:**

1. Mandatory retirement creates and sustains an acceptable flow of promotions and incentives, rendering the work force more mobile.
2. Mandatory retirement gives firms an acceptable way of breaking the ties that bind older workers to jobs and companies while avoiding competence tests, the unpleasantness of firing unsuitable workers, and the cost of retaining less productive workers.

**At the employee level:**

Mandatory retirement gives older workers a legitimate and respectable way to leave the work force.

In conclusion, there are three basic alternative strategies with respect to employment of older workers:

1. Eliminate mandatory retirement without changing the pension age.
2. Raise the pension age and the mandatory retirement age.
3. Encourage continued employment by facilitating voluntary decisions of employers and employees.

The latter strategy would encourage voluntary changes within the existing context. It may be most appropriate, considering future uncertainties.

The following measures are implied by this strategy:

1. Making training and retraining opportunities available, at least on a demonstrative basis, to show the potential benefits.
2. Consultation with employers and employees about how to best realize the potential of older workers, using demonstrations as positive examples of possible benefits.

We will now briefly consider other roles, such as, formal and informal volunteering. The elderly make an important contribution to their adult children. In Israel, a large percentage of mothers with young children are employed, and relatively large families are in need of more support from older family members. In addition, army reserve duty takes fathers away from their families for considerable periods each year. Such factors create strains on the family that grandparents may ease. In Israel, physical proximity and strong societal norms reinforce the role of elderly family members. Though this role is being enhanced in many countries by the rise in divorce rates and the number of one-parent families, such causes are still limited in Israel. As they develop, however, they provide a further source of need for parental support. As Israel's family norms change, it is unclear whether the norm of parental contribution will continue or whether the elderly will concentrate more on themselves and begin to distance themselves from their children.

The elderly are considerably involved in voluntarism (10% of all elderly aged 60+ are involved in an organized volunteer activity). It is the established policy of the social welfare authorities to attempt to increase this involvement. Various community studies and national surveys have indicated that an additional 11% of the elderly are interested in volunteer activity. Surveys (Korazim and Cohen, 1989; Habib et al., 1989b; Steigman, 1988) have also indicated that the potential demand for elderly volunteers is almost unlimited - although the roles may not always be those in which the elderly are most interested - and that focused efforts at recruitment and mobilization can significantly expand the extent of voluntarism (Steigman, 1988).

Many elderly volunteers launched their volunteer careers after the age of 65, thus refuting the argument that only those who were volunteers when they were younger are likely to seek this involvement in later life. There have also been notable successes in recruiting from groups without a strong tradition of voluntarism, such as, those of Asian-African origin, and those with low education (Steigman, 1988). At the same time, it is unlikely that voluntarism will become as important as paid employment in the pre-retirement years. Realizing the potential for voluntarism will depend on the allocation of organizational resources for recruitment and utilization of volunteers.

#### **8.4 Policymaking, Heterogeneity and Immigration**

In conclusion, we will address several unique features of Israeli society that affect policymaking.

The elderly population in Israel is still a first-generation immigrant population whose members come from many cultural backgrounds and do not speak Hebrew well. This diversity of the elderly population has a number of important implications for policy.

##### **Family support**

Family networks, co-residence and actual support are much greater among those of Oriental origin than among those of Western origin (Habib and Windmiller, 1988) and are still greater among the Arab population. This heterogeneity complicates the decision as to the rate at which services should be expanded to reduce the burden on the family. Ultimately, one set of norms will be applied to all groups. There is an ongoing debate as to whether cultural differences among the groups should be considered.

##### **Regional equity**

One of the basic issues facing every society is that of "territorial justice": How to distribute services among various geographical areas. In Israel, variation in cultural background is associated with variation in the need for and tendency to utilize services. For example, ethnic differences are associated with differences in dependency levels, in the availability of informal support, as well as in the tendency to use services, particularly institutional services.

This cultural variation makes it difficult to assess utilization rates and to implement policies geared toward "territorial justice" (Factor 1988a).

### **Pension entitlements and immigration status**

Immigrant status has implications for benefits eligibility within various service systems, particularly the social security system. The receipt of social security and various retirement benefits is generally influenced by years of contribution. In an immigrant society, large numbers of elderly have not had the opportunity to accumulate these benefits in their new country while they have lost the benefits they accrued in their countries of origin. Elderly who came to Israel as refugees of World War II, or because of persecution in their countries of origin, did not bring their previous rights with them. Usually, there are no provisions for the transfer of pension rights across nations and societies. This poses a major dilemma for the pension system. What is the nature of the assistance that should be offered to such immigrant groups? Is it confined to the guarantee of a minimum income on the poverty line, or does it go beyond that?

Israel has a three-tier pension system. There is a flat rate pension (tier 1) and supplementary benefit (tier 2) under social security. There is almost universal coverage within a work-related third tier that provides benefits linked to previous wages and years of contribution. Social security benefits are a flat 16% of the average wage and the supplementary benefit is paid to those without other income so as to provide them with at least poverty line minimum income. There is a premium for increased seniority, but this is limited to a maximum of 50% of the bonus based on the basic pension and is provided to people who have between 10 and 20 years of seniority. Thus, seniority plays a limited role in social security benefits, partly because of immigration in Israeli society. In the third tier, work-related pensions may be as high as 70% of previous earnings. The effective level of pension coverage is lower as a number of significant components of wages are not included in the pension base. These components vary significantly by occupational group and economic sector and thus introduce considerable variation in actual pension levels. There is today a direct proportional relationship between seniority and the number of years that one has paid into the fund. In the past, however, the first years of payment earned a relatively high percentage of the pension, and the bonus for seniority tended to decline over time. This obviously offered a major advantage to those with limited seniority. It is claimed that this is responsible for some of the pension system's current financial difficulties, and for the projected deficits that are a source of considerable concern. The dilemma of dealing with an immigrant population found expression in pension policy and led to long-term difficulties that have yet to be resolved (Cohen, 1985).

The elderly's heterogeneity and their differential access to pensions also affect the degree of equality. Studies have shown that the overall relative status of the elderly in Israel is fairly high in comparison to some of the major Western countries. On the other hand, there is a very high rate of population whose resources fall beyond the statistical "poverty boundary" (Achdut, 1987; Achdut and Tamir, 1986); this applies even when a comparative international standard is used.

Thus we see that, while average relative incomes are high, the percentage of poor is also relatively high. This is explained in large measure by the fact that the vast majority of the elderly have not acquired entitlement through a work-related pension and thus rely only on social security and the supplementary benefit provided to those without additional sources of income. Many of Israel's elderly immigrated at an advanced age and thus could only join the labour force in a marginal way, if at all. Thus, they did not work the minimum ten years necessary to accrue a pension. Others may not have maintained stable employment, thus losing or using pension rights by shifting work from one employment to another. Those who do benefit from a work-related pension have generally accrued only minimal seniority and thus receive a low pension.

### **Language barriers to services**

A further challenge is to address the needs of elderly immigrants who do not have a command of Hebrew. A very large percentage of Jewish elderly do not speak Hebrew well. Of course many Arab elderly face similar difficulties. This affects interaction between professionals and clients within the service system, and limits the effectiveness of media communication with clients. This problem has largely been solved in the Arab sector by the development of a separate Arab-speaking network of services; almost all public information is available in Arabic as well as in Hebrew. However, for Jews from various countries the problem may be more severe.

One approach to addressing these language difficulties has been an aggressive policy of teaching Hebrew even to immigrants who immigrate late in life. In recent years, elderly and older adults who have been in the country for

many years have been offered a second and third chance to learn Hebrew as part of adult education programs. This opportunity comes after they have been freed from some of the obligations of raising a family and an active work life.

#### **Cultural integration vs. particularism**

The decision to integrate or segregate within the service system also presents a problem: Does one integrate the elderly from various cultural backgrounds in social clubs, day-care centers and institutions? At present, two parallel approaches exist. The public system of day centers and institutions has been developed on the principle of full integration. However, efforts are made to be considerate of the cultural interests of various groups in the preparation of food and the provision of recreational and cultural activities. In the voluntary sector, institutions which are designed for specific cultural groups have been privately developed. In particular, many immigrant organizations have developed institutions and social clubs based on the "Landtsmanschaft" concept, catering directly to the interests and needs of people from their countries of origin. These institutions serve those who can afford to pay a large percentage of the cost. This may reduce some of the pressure for segregation in the public sector. The overall response, then, is mixed, combining elements of segregation and integration.

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Habib, Jack



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המאמר "סוגיות מדיניות בחברה מזדקנת" הופיע כפרק במונוגרפיה Demographic and Socio-Economic Aspects of Population Aging in Israel, שהוכנה על-ידי הלשכה המרכזית לסטטיסטיקה (למ"ס) בשיתוף עם ג'וינט-מכון ברוקדייל לגרונטולוגיה. זהו חלק ממאמץ בינלאומי המתואם על-ידי CICRED (The Committee for International Cooperation in National Research in Demography), לספק תיאור מקיף של מגמות בהזדקנות האוכלוסייה, ושל המאפיינים הדמוגרפיים, הכלכליים, החברתיים והבריאותיים של הקשישים במדינות שונות בעולם.

בין הסוגיות הנדונות בפרק מסכם זה ניתן למצוא דיון בחלקם של הקשישים בהוצאות הציבוריות; תפקיד המשפחה כמספקת תמיכה לקשישים והאיזון בין תמיכת המשפחה לבין התמיכה הממשלתית; תפקידי הקשישים בתעסוקה ובהתנדבות בגיל המבוגר, וההשלכות שיש למוצא האתני המגוון של הקשישים בישראל, שרבים מהם אינם ילידי הארץ, על זכויותיהם ועל נגישותם לשירותים.