

Value of children in Indonesia

—including the result of pilot research in West Timor—

インドネシアにおける子どもへの価値について
—西ティモール地域でのパイロット調査—

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Abstract

'Value of children' is a concept which is applied in order to explain the varying fertility levels within different cultural settings. The focus of the research is the question which conditions determine the value of children and desire for children preferences. The place of research picked up Indonesia because of multiracial developing country with their different cultures. The survey conducted for 99 Indonesians who live in East Nusa Tenggara province, area of West Timor using a prioritizing method in 2011.

Determinant of economic value for children has not so strong factor than that of a family continuation. Although there is a tendency of son preference, it is not an overwhelming trend. Due to globalization, determinants of value for children are similar tendency between developing and developed countries same as urban and rural area.

要旨

「親が自分の子どもへ抱く価値」つまり「子どもへの価値」は、それぞれの文化背景を元に子産み行動の状況を左右する概念である。本論文では、インドネシアにおける子どもへの価値について明らかにするために、子どもへの価値についての文献調査を行い、その後2011年に西ティモール地域の東ヌサテンガラ州の現地住民99名についてプレ調査を行ったので報告をする。なお、子どもへの価値については、子どもへの価値への要素および子どもの性別の嗜好に焦点を絞った。また、インドネシアは多民族文化から形成され、それぞれが異なる文化背景を持つ発展途上国であるため調査の対象とした。

調査の結果、子どもへの価値として経済的価値を期待する者の数は、家系の存続を期待する者の数ほど多くなかった。また、男児を希望する傾向はあったものの、それほど強い傾向とはとらえられなかった。グローバルイゼーションの風潮の中で、子どもへの価値についての意識は、途上国と先進諸国また都市部と農村部で近似していく傾向があると考えられた。

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Introduction

Fertility refers to the number of live births and has some proximate determinations such as proportional of women married, patterns of sexual activity and postpartum infertility. Generally there are some indirect factors which have an effect on fertility including socioeconomic and bio-social factors. According to Friedman et al.¹⁾ fertility depends on at least four different kinds of determinants: biological, control over contraception, chance, parents' desire for children. Nauck and Klause²⁾ reported that the motivational determinants of fertility included both the personality of the individual actor and the structures of the social environment.

The decision to have children or the determination of the number of children is an intimately personal one. Natural growth rates, which are mainly influenced by birth rate, however, vary dramatically from place to place, with most countries in Africa, Asia and Latin America recording growth rates much higher than those of the more economically developed countries of Europe, North America and Japan. It is clear that of the nation with population increases of over 2.5% per annum in 2010, more than three-quarters were in Africa. By contrast, many European and some developed countries had rates of increase well below 1% or so. In the other word, most of developed countries have passed through the demographic transition, whereas many developing countries are still at stage of pre-transition³⁾.

In general, measuring the mean ideal family size draws a distinction between societies and groups which have "small" and "large" family norms. For example, in traditional societies, many children per couple are the social norm

and such a society looks askance at couples who have no or few children. On the other hand, in modern societies, a lot of people have fewer children because that may be socially acceptable behavior in the circumstances in which they live. There is close relationship between the fertility attitude and social norm. Furthermore, the relationship between the value of children which is an explanatory variable of fertility and the social norm is very close.

In the past, many demographic researchers have studied the value of children. Hoffman and Hoffman⁴⁾ proposed that child bearing decisions resulted from a balance between the benefits and costs of having children, while alternatives offered parents other avenues besides children for personal fulfillment and producing a qualitatively different value system. Buhler⁵⁾ reported that a central aspect of the value supplied by children is the fact that they emerge from interpersonal relationship. Parents receive joy, satisfaction, support, or old age security because of their direct relationships with their children.

In many cultures such as China, India, it is considered especially important to have a son who survives to adulthood. The traditional preference for sons is deeply rooted in the structure of the society. In China and India sons enjoy a great deal of social prestige. Only men can perform the traditional ancestor cult. Since girls marry into another family, only sons can guarantee for the care of the parents in old age. In societies where families have to pay a dowry when their daughters marry, the practice of discrimination against daughters is far more widespread than in those where the bridegroom has to pay bride-money or where marriage is possible without financial transfer. The killing of female new-born babies as the

final solution to the dowry problem is becoming more accepted, particularly in the poorer areas of India. South Korea, however, is shifting their consciousness. Such social changes have also contributed to addressing a sharp imbalance in the ratio of males to females. The imbalance hit its peak in 1990 when 116.5 boys were born for every 100 girls. Partly thanks to a strict ban on the use of sonograms to determine the sex of a baby as well as outlawed sex-selective abortions, the ratio fell to 106.4 boys born for every 100 girls in 2008. So, the nation succeeded in containing the ratio within the naturally harmonious level of between 103 and 107. In a nutshell, a growing number of people do not think that they must have sons. They focus more on their own happiness in family life than on their dedication to the male-dominant family system, which has no place in the 21st century. Also, there is no question that more young couples want baby girls as they likely feel they will enjoy raising daughters more than sons³⁾.

In many societies people now believe that education is beneficial for themselves and their children, whereas in some societies parents are still regard education as a waste time: There is tremendous popular demand for education, particularly for schooling, in virtually all countries, developing and developed alike. This may be because education has strong linkage with investment in human capital at both the individual and the social level. From the view of the individual side education tends to a better job and higher income, from the social side investment in human capital helps to accelerate development, especially economic growth.

However, concerning educational problems, there is a difference between developing and developed countries. In developing countries, the major problem has been the high frequency

of “dropouts”, those who withdraw from schooling before an academically meaningful course of study. This problem results mainly from poverty which is connected with the negative value, the economic cost of children. On the other hand, in some developed countries such as South Korea and Japan, the high “competition” for entrance examination causes some educational problems, for example, only subjects of entrance examination are stressed and other subjects such as physical education are treated superficially. As income rises, parents want to get better education to their children that is, they prefer “quality” over “quantity”. This phenomenon may be associated with the value of children related to psychological benefits which parents take pride and get satisfactions with their children’s school accomplishment.

The purpose of our research is to grasp the situation of child value in Indonesia using referral review and pilot research as a first step.

I. Overview of demographic and fertility in Indonesia

Indonesia is the world’s largest archipelagic state with more than 17,000 islands, of which 6,000 are inhabited. Indonesia is, with more than 241 million inhabitants, the world’s fourth most populated nation after China, India and the United States. Currently, the proportion of people who live in cities is 43%⁵⁾. Population density is 127 persons per square kilometer; however, there are large differences the islands and provinces. Indonesia's population problems center mostly the issue of population density. Together with the adjoining smaller islands of Madura and Bali, Java accounts for just over 7% of the Indonesia land area, but these islands

are populated by some 135 million inhabitants. The population of the special district of Jakarta was 10,187,595 as of November 2011. By contrast, the province of Papua represents 22% of the total land mass, yet has only 1% of the population. About 88% of the population is Muslim. Roughly 10% is Christian (Protestant and Roman Catholic) and approximately 2% is Hindu and Buddhist. All five of these religions are formally recognized in Indonesia. There has been a decline in fertility rate from 5.4 children per women in the early 1960's to 2.1 children per women in 2011. The average age of women of when they give birth to a child was 28 in 2003. Among women between 35 and 39, only 6.6% are childless.

II. Family Planning in Indonesia

Over the past 20 years, it has experienced a rapid fertility decline, much of which has been attributed to a strong family planning program. Indeed, Indonesia is cited widely for its dynamic and innovative family planning program, which reaches effectively across all socioeconomic strata and to rural as well as urban populations⁷⁻⁹). Family Planning Coordinating Board (BKKBN) 's organization has been cited frequently as a model of government-sponsored fertility control in a developing country⁸⁻¹⁰). Established in 1970, BKKBN developed a flexible family planning program that coordinates the activities of several ministries, local governments, and volunteers. It promotes two-child families by encouraging women to postpone marriage and by limiting births through contraceptive use.

The focus of the program was on Java and Bali, the 2 most populous islands. Local clinics became the locus for birth control efforts. Fieldworkers affiliated with the clinics were

given the job of advocating birth control use door-to-door. Fieldworkers "incentive programs," area "target" programs, and "special drives" were organized to create new contraceptive "acceptors."

Bali has shown the greatest success in family planning. It is a small island with a highly developed system of local clinics. The strong community structures on Bali encourage birth control use. Bali, which is predominantly Hindi, is more receptive to the IUD than Java, which is predominantly Muslim. In East Java, the authoritarian bureaucracy makes efficient use of its money. Central Java is making slow but steady progress in family planning. In West Java, fieldworkers are teamed with paramedics; there, door-to-door contraceptive supply was more effective than the clinic system. In many areas traditional methods, i.e., herbs, massage, total abstinence for long periods of time, etc., were favored. More educated women often do not use contraceptives for fear of side effects. The need for family planning on the outer Indonesian islands is not as great, but programs are being set under way. These programs are the beginning of an attempt to alleviate problems that could be encountered if Indonesia's population growth continues unchecked.

III. Review of value of children in Indonesia

Several researchers reported about the value of children in Indonesia. Some studies argue that the high value placed on fertility is mainly due to expected economic returns that parents receive in the form of additional labor power and security in old age^{11,12}).

White and Peet reported in Javanese present families in economically poor village,

very young children are actively involved in housework, care of younger siblings, and some agricultural chores. While higher-class Javanese families, who do not need their children's economic contribution, have more children than peasant families. Koentjaraningrat¹³⁾ studied that the number of children a man has also increases his status at work. Javanese in white-collar occupations consider persons with many children higher in status than those with only a few. Consequently, progresses in the early 1970s to introduce family planning were less successful among urban families than among peasants. Megawangi¹⁴⁾ researched about the consciousness of having children for 400 families in East Java. This result showed that almost 90 percent of couples, in both the urban and the rural areas, no longer agree with the statement, "Having many children can bring luck "; about 55 percent of both rural and urban couples said that the ideal number of children is one or two. Arnord and Darroch¹⁵⁾ studied that many Javanese have children to provide security in old age. There is an expression for this: "when you are old, your children will take care for you. Even if you are very rich, the kind of care your children give you cannot be bought". Children are obligated to care for elderly parents. However, a shift in value of this kind of obligation may have occurred, as the most recent findings show that only 53% of Javanese parents agree with the statement. In Javanese society, children of both sexes equally wanted. Preferential treatment based on gender has never been noted in Indonesia, except for willingness to pay for tuition for higher education for boys.

A study conducted by Megawangi¹⁴⁾ in East Java, Nusa Tenggara Timor, and Nusa Tenggara Barat (n-6796), showed that female children have better nutritional status, as measured by

weight for age, than male children. Hartoyo¹⁶⁾ conducted the survey in rural families in West Sumatra and central Java. His research purpose was to family behavior in allocation of time and income for investment in children. Rich and small families invested significantly more time and money in children than poor and large families. Mother's working time, child's age and family type had negative and significant influence on the amount of time spent on children. Mother's time spent outside the home may lead to less time investment, and less time investment may negatively influence the child's nutritional status.

Nag et al.¹⁷⁾ searched for test the assumption of the microeconomic theory of fertility that the economic value of children is a factor influencing fertility behavior of parents in peasant societies of Java and Nepal. His important findings include the followings: (1) The work input of children under 15 in both areas probably have net positive economic value to their parents, aside from the support they provide to parents during age. (2) In both areas, girls do more work than boys in almost all age-groups. (3) The correlation coefficient between the total work input of children and the balance of income over food expenditure in household is significant. (4) While avoiding the extreme pressure on the household economy that would result from uncontrolled fertility, they have achieved a relatively large number of surviving children.

Albert et al.¹¹⁾ argued on difference consciousness of value of children between urban and rural Indonesia. They concluded four topics: first they confirmed three factors on value of children, an emotional, socio-normative and old-age security factor. Second is to examine similarities and differences of value of children dimensions between the

generation and regions. The results roughly confirmed their expectations of children over the generations and between rural and urban samples with a still high importance of old-age security factors. Gender differences found in the urban sample may indicate a stronger impact of social change on male than on female. Third goal was to find the ideal number of children as reported the mothers and of adolescents, but it was still unclear. Finally last examine is the impact on the value of children. They concluded that value of children have an important impact on mother's parenting goal.

IV. Pilot research on value of children in the province of East Nusa Tenggara, area of West Timor

The population of East Nusa Tenggara province was estimated to be 4,683,800 and this area of West Timor accounts for 35.5%, 1,662,056, of the provincial population in 2010. The religious mix of this area is atypical of Indonesia with around 90% Christian (majority Catholic, but with a large Protestant population), 8% Muslim, 0.6% Hindu or Buddhist, and 0.4% holding traditional beliefs. The reason of this situation of religious mix was to become a refuge for Indonesian Christians fleeing from conflict in Maluku and Irian Jaya.

According to some official data, the secondary school enrolment rate of 39% is dramatically below the Indonesian average (80% in 2003/04, according to UNESCO). Lack of clean drinking water, sanitation, and health facilities mean that child malnutrition (32%) and child mortality (71 per 1000) are higher than in most of the rest of Indonesia. Maternal and infant mortality are high partly because of poor access to health facilities in isolated rural

areas. Malaria is a significant problem in parts of the province with the result that the rate of infant mortality caused by malaria, in recent years, as been the highest across Indonesia.

'Value of children' is a concept which is applied in order to explain the varying fertility levels within different cultural settings. The focus of the research is the question which conditions determine the desire for children preferences.

Methods

We surveyed Indonesian who live in Linammutu village and Kupang city of West Timor area (n=99, male=34, female=65). Depends on age, three groups were organized: A group is consisted of the people who is under 20 years old (n=28), B group is between 20 and 24years old (n=49), and C group is over 25 years old (n=21). The number of respondent who live in rural was only 26 and in urban was 73. Our team interviewed to the people by using "face to face" method and asked them to place 7 issues in priority order. Prioritization is a process whereby an individual places a number of items in rank order based on their perceived or measured importance or significance¹⁸⁾.

In order to know their situation, we put 5 issues, physical environment, socio-economic services, health services, disease and disability adults, disease and disability for child. With regards to value of children, 2 issues are set up: value of child and child preference.

This whole study plan was reviewed and approved by the Ethics Review Committee of Charles Darwin University (Approval No.2011-0720).

Analysis

All items were scored priority numbers in

response the number of setting issues. Chi-square analysis and analysis of variance were used to compare their responses. Significant level was $p < 0.05$. For all data analysis we used the SPSS version 18.0 software.

Results and Discussion

Results of determinants of value for children are shown in Table 1 and 2.

And results of child preference are shown in Table 3 and 4. We have no significant differences for all data using Chi-square analysis ($p < 0.05$).

As Table 1 indicates, gender has some differences about value of children. Female’s prioritizing needs for child is “adult status”, whereas male’s priority is “emotional value”. Also Table 4 shows, age spread has some differences about value of children. Middle age group (20-24 years old) has strong priority on emotional and adult status value, though the others have strong priority on family continuation. Determinants of “Adult status” can be linked with “social norm” as well as emotional value. Also factor of “family continuation” can be linked with “social norm”. We need more research about social norm in this area. Although there is a tendency of son preference, it is not an overwhelming trend. Daughter preference put in low priority in all groups.

According to Nishimura¹⁹⁾, Sri Lanka which is similar situation of economy and TFR as Indonesia has tendency of daughter preference. With the aging society, many elderly people who are retired persons have the strong tendency to live their own child. It is natural that many elder widows expect a support from their daughter. As the social norm, the expectation the sex role of the female in the care for the elderly are raised and it is related expecting the birth of the girl. Aging society affects two demographic factors, increasing longevity declining fertility. An increase in longevity rises the average age of the population by increasing the numbers of surviving older people. In 2011 life expectancy in Sri Lanka is 75years old, whereas in Indonesia it is 69years old. Aging rate over 65 years old in Sri Lanka is over 11.8% in 2009, while 8.8 % in Indonesia. Demographic transition maybe makes change child preference.

We can find several results among each

Table 1 Result of value for children among female and male

Value	Female (n=65)	Male (n=34)
Adult status	1	4
Emotional value	2	1
Family continuation	3	3
Economic value	4	2

Table 2 Result of value for children in age groups

Value	20-24 (n=58)	-19 (n=29)	25- (n=12)
Emotional value	1	3	2
Adult status	1	2	2
Economic value	3	3	2
Family continuation	4	1	1

Table 3 Result of child preference among female and male

Preference	Female (n=65)	Male (n=34)
Son	1	2
Daughter	2	3
No preferences	3	1

Table 4 Result of child preference in age groups

Preference	20-24 (n=58)	-19 (n=29)	25- (n=12)
No preference	1	2	3
Son	2	1	1
Daughter	3	3	2

group by analysis of variance (ANOVA) by SPSS Ver18.0. Group means that the item has to be priority number one. There are follows:

- 1) Son preference group is linked with the grope of family continuation group significantly. ($p < 0.005$) It is natural result, because most of male children in Indonesia are still socialized to adopt the norms and expectation of family, to foster continuity of the family.
- 2) No preference group is linked with the adult status group significantly. ($p < 0.005$) Women prefer to the adult status for having a child than men. ($p < 0.005$) Having a child as well as marriage is still a necessary prerequisite for their successful and stability socialization in Indonesia.
- 3) Compared with three age groups, elderly group is linked with a determinant of family continuation for child value significantly. ($p < 0.005$) and also elderly group prefer to son than another group. ($p < 0.005$)

Table 5 shows the prioritization test. From aspect of physical environment, both males and females take more interests in “Rubbish in the street” “Accessibility of clean water” “Water quality”. From aspect of socio economic, many males are interested in “Financial problem” while females are interested in “unemployment” “Lack of academic quality” “Hard to accessibility in health service” Both a lot of males and females think that customs of drinking alcohol and smoking are not good.

The comparison revealed that there are no significant discrepancies between males and females. Findings include that they have less interests for child surroundings such as recreation space for child, pre-school facilities. Regarding with health service, the main problem is seen to be the lack of General Practitioner (GP) in this area. Serious problems

Table 5 Results of prioritizing needs with communities

Priority	Female (n=65)	Male (n=34)
Physical environment : priority		
Rubbish in the street	1	3
Accessibility of clean water	2	2
Water quality	3	1
Dangerous road	4	5
Poor quality housing	5	4
Seasonal change of transportation	6	7
Security	7	5
Few recreation space for children	8	8
Socio-economic services : priority		
Financial problem	1	4
Unemployment	2	1
Lack of academic quality	3	1
Hard to accessibility in health service	4	1
Hard to contact with health service	5	5
Information not easily availability	6	6
Lack of pre-school facilities	7	7
Health services : priority		
GPs appear too busy	1	1
Lack of all preventive children services	2	2
Lack of home support after hospital discharge	2	3
Lack of well women service	4	4
Disease and disability for adults : priority		
Drinking alcohol	1	2
Smoking	2	1
Acceptance of ill-health	3	3
Depression and anxiety	4	4
Disease and disability for child : priority		
Diarrhea	1	2
Poor nutrition	1	1
ISPA	3	3
Inadequate parenting skills	4	4
Allergy	5	5

in modern society, mental problems and allergy, put in low priority in this area.

V. Conclusion

We think that the benefits of having children can be classified as positive and negative, or as economic concerns and psychological satisfactions.

With more relevance to developing countries, children are treated similarly to investment goods, or economic assets. Parents expect to

receive economic benefits from their children within a few years of the children's birth. On family farms and in other household enterprises there is usually something that even a very young child can do to increase production. In many poor societies large numbers of children also work for wages outside the home. As the parents grow old, the children may give economic support by working in their parents' field and thus provides a form of social security in societies lacking institutional programs to assist the elderly.

However, recently some tendency has changed. In both rural and urban areas of developing countries, the cost of children to parents is exacerbated by the introduction of compulsory education acts and the increased need to educate children so they can take up a respected position in society. Children are increasingly prohibited under law from working outside the household and make an increasingly limited contribution to the household, as school children are increasingly exempted from the expectation of making a significant contribution to domestic work.

In developed countries different tendency has occurred. Children are regarded more like consumer durable such cars or television sets which give satisfactions over long period time. Children need expense basically for food, clothing housing and sometime for education and hires child care services. In the United States, middle-income families with a child born in 2011 can expect to spend \$235,000 over 17 years, according to a new report by the United States Department of Agriculture. That cost factors in food, shelter and other necessities to raise a child, and does not account for inflation. It also marks a whopping \$8,000 increase, or 3.5% rise, in just one year.

Generally, the costs of rearing children are high but the economic benefits are low. Also, the introduction of an institutionalized social security system or social net system means that parents do not need children to support them in their old age.

Increasing female literacy and employment lowers the uncritical acceptance of childbearing and motherhood as measures of the status of women. Working women have less time to raise children; this is particularly an issue where fathers traditionally make little or no contribution to child-raising, such as southern Europe or Japan. Valuation of women beyond childbearing and motherhood becomes important.

The modern transition from high to low fertility means that successive generations of parents have fewer and fewer children. The transition in the value of children consists of changes in parents' perceptions of specific values and disvalues attached to their children. Furthermore at present, children become economically less valuable, but they become valued for different reasons and the burdens they impose on their parents are altered not just quantitatively but also qualitatively.

In general, the benefits and the cost of having children can be classified as

- 1) Psychological-emotion value
- 2) Economic-utilitarian value
- 3) Social-normative value

Psychological- emotional reasons for getting children are for instance; "to have someone to love and care for" "because of the pleasure you get from watching children grow" and "because it's fun to have young children around the house" the Economic-utilitarian dimension can be illustrated statements such as "because a child helps around the house", 'to have one more person to help the family economically"

or “children can help when you’re old” illustrate. The dimension of social-normative value of children is expressed by items such as ‘to carry on the family name’ or ‘because parenthood improves your standing and your reputation among your kin.

In conclusion, the consciousness about the value of children, the differences between the developing and developed countries will become to disappear near future.



Our interview in the front of local people’s house



Quality of drinking water



Dangerous road even in dry season

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