

# AGING

## TRENDS

U.S. Department of Commerce  
BUREAU OF THE CENSUS  
Center for International Research

# KENYA

Population aging in Kenya has received little consideration from development planners, which is understandable in view of the agrarian nature of Kenya's economy and the attention focused on prevailing high rates of fertility. Percentages of population in older age groups are low, even by African standards, and are not expected to rise significantly in the foreseeable future. However, these percentages belie a very real increase in numbers of older population, as well as a growing concern about disruptions in the traditional social support structure for elderly citizens.

Roughly 5 percent of Kenya's population is aged 55 and over, with only 2 percent in the elderly category of 65 years and over (table 1).

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

Region or country	Year	55 and over	65 and over	75 and over
Eastern Africa	1989	6.4	2.7	0.7
	2005	6.1	2.6	0.7
	2020	6.7	2.9	0.8
Kenya	1989	5.1	2.1	0.5
	2005	5.0	2.1	0.6
	2020	5.6	2.4	0.7
Tanzania	1989	6.6	2.9	0.9
	2005	6.1	2.7	0.8
	2020	6.4	2.9	0.9
Zaire	1989	6.7	2.8	0.7
	2005	6.8	2.8	0.8
	2020	7.4	3.2	0.9

Projections to the year 2000 show virtually no change in these percentages, with modest increases expected after the turn of the century. The median population age (the age that divides a population into numerically equal parts of younger and older persons) of 14.5 years will also be essentially static during the next 15 years, but is projected to rise to 17.4 years by 2020. The low proportions of current and projected older population are due primarily to two associated demographic developments at the younger end of the age spectrum: extraordinarily high fertility and relatively low infant mortality. Kenya's total fertility rate is estimated at 7.8 births per woman, one of the highest rates in the world. There has been little change in this level during the last decade, with only 17 percent of married women of reproductive age reporting contraceptive usage (Kenya CBS, 1984). Even assuming a 40-percent decline in fertility between now and 2020, increasing numbers of young mothers will bear increasing numbers of babies, such that the population under age 5 will grow annually during the next three decades. Population expansion at the youngest ages is further accentuated by declines in infant mortality; each year, proportionally more babies survive the high-risk first year of life.

Against this backdrop of rising numbers of Kenyan youth and working-age population, the percentage of older Kenyans shows little change. But the absolute numbers of older population are begin-

ning to swell. Between 1969 and 1989, the ranks of the 55-and-over age group grew by approximately 440,000 persons. In the next 16 years, the increase will be more than 1 million (table 2), followed by a 2-million increase from 2005 to 2020. Relative gains among the elderly (65+) and the oldest old (75+) will be even greater, with the latter category more than doubling every 15 years. The growth rate of the oldest old now exceeds that of the total population (figure 1), and will climb to nearly 5 percent per year shortly after the turn of the century. By this time, the older population as a whole will also be growing faster than the total population.

Table 2  
Absolute and Percent Change in Older Age Groups: 1989 to 2020  
(Absolute numbers in thousands)

Year	55 and over	65 and over	75 and over
1989	1,243	509	132
(% change)	(88)	(95)	(109)
2005	5,335	995	276
(% change)	(90)	(90)	(103)
2020	4,440	1,895	559

## LIFE EXPECTANCY

Life expectancy at birth in Kenya is high compared to other countries in the region (figure 2). Within Sub-Saharan Africa, Kenya's current level of 61 years (59 years for males and 63 years for females) is exceeded only in the Republic of South Africa and in several island nations in the Indian Ocean. Women who reach age 60 in Kenya can expect to live another 17 years, while men attaining

Figure 1.  
Average Annual Percent Growth of Total and Older Population

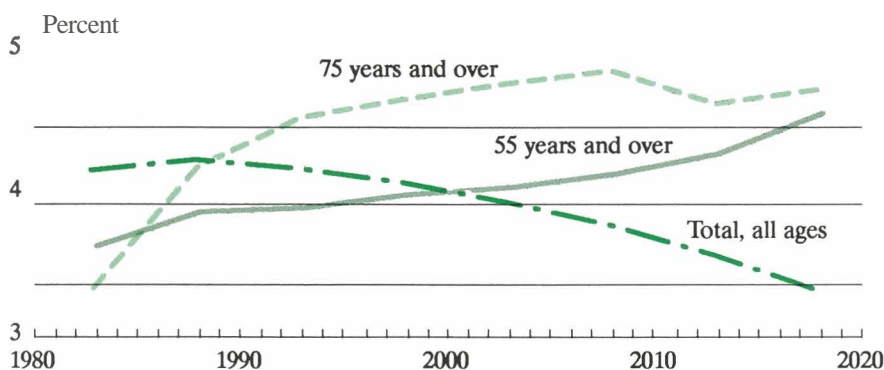
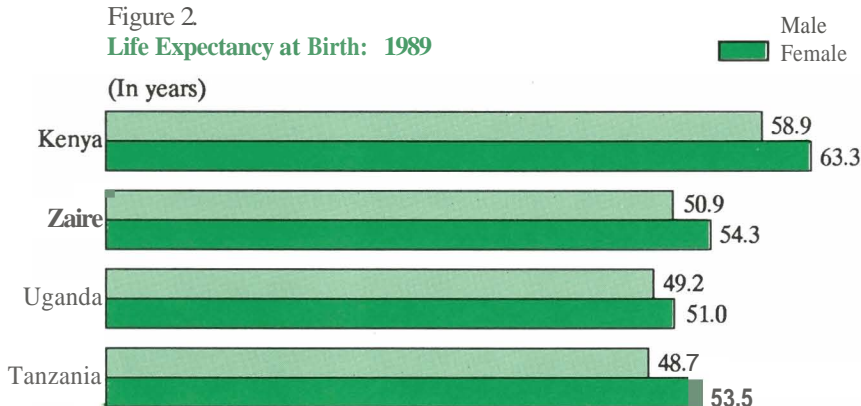


Figure 2  
Life Expectancy at Birth: 1989



this age can look forward to an additional 15.5 years of life.

An important factor in extending life expectancy at birth has been Kenya's success in reducing infant mortality. Although the level of infant mortality is still high by global standards—70 infant deaths per 1000 live births—this rate is considerably below the Sub-Saharan average of 115, and has declined nearly 25 percent during the last decade. As noted earlier, the combination of declining infant mortality and continued high fertility in Kenya deflects attention from growing numbers of older population by keeping the overall population youthful.

Reliable information on patterns of morbidity and mortality among the older population is lacking. As of the late 1970's, infectious and parasitic diseases dominated the morbidity picture for the population as a whole, and this is likely to be true for the older population as well. New research initiatives will be needed to determine if Kenya is experiencing the current trend observed in most other de-

veloping regions of the world, wherein the prevalence of communicable disease among the elderly is lessening while the incidence of chronic conditions rises. Another mortality factor of enormous potential import to future planning decisions is the incidence of AIDS, which may hasten population aging because the disease disproportionately affects younger-adult age cohorts.

### GENDER and MARITAL STATUS

While older women outnumber older men in virtually all countries of the world, Kenya appears at first glance to be an exception. The latest population censuses (1969 and 1979) both recorded more men than women over the age of 54; however, official life tables show greater female than male longevity. The application of various adjustment techniques (for underenumeration, age misreporting, and conformity with expected patterns of sex ratios, by age) results in an adjusted age/sex structure which suggests that the percentage of women in 5-year age cohorts rises with age (figure 3). As is

true in most developing countries, the proportion of women among the older population is projected to increase.

Widowhood rates in older population groups vary widely in the developing world, but regardless of the level, these rates increase substantially with age. Because women live longer on average than do men, and because women tend to many men older than themselves, female rates tend to be much higher than male rates at older ages. In Kenya, the latest census data show that 16 percent of the total population aged 55 to 59 are widowed, a figure that rises to 36 percent for persons aged 75 and over. Unfortunately, 1979 census data on marital status were not disaggregated by gender. However, the gender disparity in marital status is evidenced by previous census data: in 1969, 60 percent of women aged 70 and over were widows, while only 11 percent of men in this age group were widowers.

### URBANIZATION and LIVING ARRANGEMENTS

Several studies of older population in Kenya have suggested that traditional patterns of family support of the aged are eroding, due largely to migration and changing societal values. The Kenyan national report to the 1982 World Assembly on Aging noted that while its traditional agrarian economy was conducive to family cohesion and stability, the shifting locus of production to plantations, mines, and factories means that family members are often and family cohesion is thereby weakened (UNDIESA, 1985).

Urbanization is regarded as the major vector of change. Kenya's urban population more than doubled in the 1969-79 intercensal period, registering an average annual growth rate of 7.5 percent. As younger Kenyans migrate to the cities, the age profile of rural areas becomes older: 7 percent of rural population is aged 55 and over, versus 4 percent of urban population, a difference that is likely to have widened in recent years. A survey of rural elderly in Kenya found that 91 percent of respondents felt that their children did not do as much for them as



they had done for their own parents. A large majority of respondents were reported to be living in poverty, and half of these attributed their condition to neglect by their immediate family (AARP, 1986).

A 1983 survey (Khasiani, 1987) of households with older (in this case, aged 50 and over) members attempted to discern some of the differences associated with urban versus rural residence. Table 3 shows that a surprisingly high percentage of older residents live alone. The main

**Table 3.**  
Size of Households with Older Residents, for 3 Districts  
(In percent)

No. of persons in household	District		
	Nairobi	Kakamega	Machakos
1	17.6	17.8	13.0
2 to 3	22.3	34.2	48.0
4 to 6	27.1	33.7	39.0
7 or more	33.0	14.3	0.0

Source: Calculated at the U.S. Bureau of the Census based on data in Khasiani, 1987.

contrast in regional household size involves the largest households; nearly a third of the respondents in Nairobi district lived in households of 7 or more persons, whereas none of the Machakos respondents had as many coinhabitants. The Nairobi figure is thought to be a reflection of an urban housing shortage that compels many family members to live together. Elderly parents in the two rural districts were much less likely than their urban counterparts to have children living with or near them. While the question of kin proximity and contact requires further investigation, these initial findings suggest that in spite of large numbers of offspring, the rural elderly may be most vulnerable with regard to familial support.

### EDUCATION and LITERACY

The 1979 census revealed that only a small minority of the older population had received formal educational instruction. Seventy-five percent of men aged 55 and over, and 94 percent of women in this age range, reported no educational training. Fewer than 2 percent of all old-

er Kenyans had reached the secondary level of schooling. Although data for younger cohorts show that the situation is changing rapidly (figure 4), the fact remains that a majority of older adults, both current and future cohorts, are lacking the skills needed in the evolving workplace. A similar picture emerges from available data on literacy (table 4).

**Table 4.**  
Percent Literate in Rural Kenya, by Sex and Selected Age Groups: 1980/81

	Total	Male	Female
15 to 17	78	83	74
30 to 34	49	70	34
55 to 59	22	38	7
60 to 69	16	28	6
70 and over	12	20	4

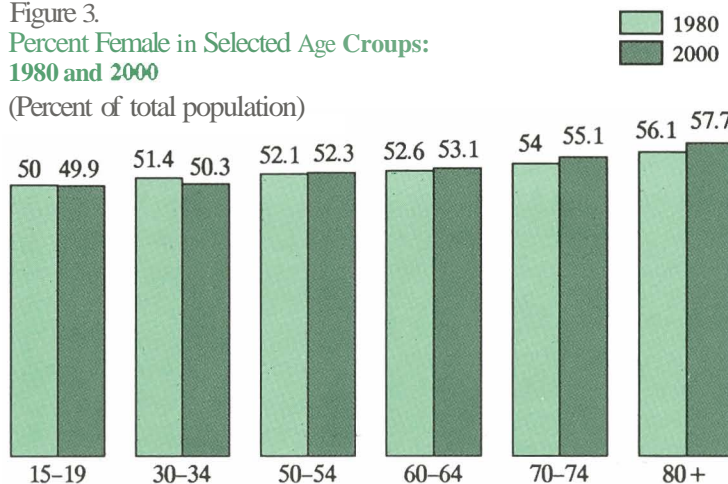
Source: UNICEF, 1984.

The percentage of rural population able to read in any language declines steadily with age, with fewer than 15 percent of persons aged 60 and over literate. The very low figures for elderly women are but one facet of the overall disadvantage facing older females: in addition to being society's least educated segment, they are most apt to be without a spouse, least likely to qualify for pension coverage, and most at risk in terms of economic insecurity.

### LABOR FORCE and SOCIAL SUPPORT

There is a lack of data on economic activity and labor force participation in Kenya, a lack which hopefully will be redressed by the 1989 national census. Survey information (table 5) indicates that by age

**Figure 3.**  
Percent Female in Selected Age Groups: 1980 and 2000  
(Percent of total population)



**Figure 4.**  
Educational Level, by Age: 1979

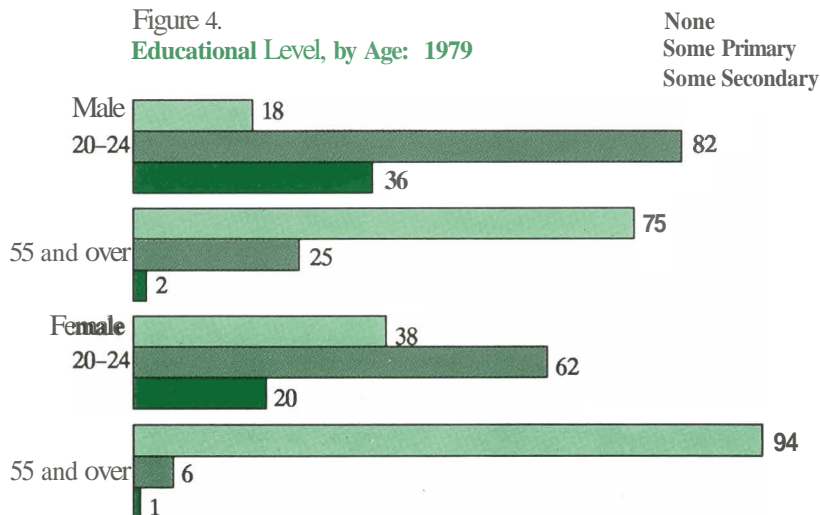


Table  
**Older Population**  
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